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MARK DATE NOV 13

Form **990-PF**

Department of the Treasury

Internal Revenue Service

Return of Private Foundation

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

OMB No 1545-0052

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.

Open to Public Inspection

For calendar year 2014 or tax year beginning and ending Name of foundation A Employer identification number ZEE FOUNDATION Number and street (or PO box number if mail is not delivered to street address) Room/suite 26-1083886 8960 SPANISH RIDGE AVE. B Telephone number (see instructions) City or town ZIP code LAS VEGAS NV 89148 702-734-3700 Foreign country name Foreign province/state/county Foreign postal code C If exemption application is pending, check here 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. Address change ☐ Name change check here and attach computation Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated under section 507(b)(1)(A), check here Fair market value of all assets at J Accounting method:
Cash X Accrual F If the foundation is in a 60-month termination end of year (from Part II, col. (c), Other (specify) under section 507(b)(1)(B), check here 718,815 (Part I, column (d) must be on cash basis) line 16) ▶ \$ Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily expenses per income income purposes equal the amounts in column (a) (see instructions)) books (cash basis only) 1 Contributions, gifts, grants, etc., received (attach schedule) N X X ş, \$\display 2 Check ► ☐ if the foundation is **not** required to attach Sch B ¥¥ 3 Interest on savings and temporary cash investments 183 183 4 Dividends and interest from securities 21,158 21,158 5a b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 844 b Gross sales price for all assets on line 6a ***** 7 Capital gain net income (from Part IV, line 2) * 3 982 8 Net short-term capital gain 147. V. 9 Income modifications . . . 10a Gross sales less returns and allowances 1 48. 184.14 N. 1. 1. 1. Less. Cost of goods sold b C Gross profit or (loss) (attach schedule) Market & Market Congress of 11 Other income (attach schedule) 20 20 Total. Add lines 1 through 11 12 22,205 22,343 0 Compensation of officers, directors, trustees, etc. . 13 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) Accounting fees (attach schedule) . Other professional fees (attach schedule) . . 17 18 Taxes (attach schedule) (see instructions) . 127 127 19 Depreciation (attach schedule) and depletion Occupancy . 20 Travel, conferences, and meetings 2015. 21 22 Printing and publications Other expenses (attach schedule) 23 90 19 71 24 Total operating and administrative expenses. Add lines 13 through 23 217 146 71 25 Contributions, gifts, grants paid 33,000 33,000 26 Total expenses and disbursements. Add lines 24 and 25 33,217 146 33,071 27 Subtract line 26 from line 12: а Excess of revenue over expenses and disbursements . Net investment income (if negative, enter -0-) . . . 22,197 EL MANY COMPANY Adjusted net income (if negative, enter -0-) . . . 0

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D۵	ırt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	End of year		
ΓŒ		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash—non-interest-bearing	710,362	718,815	718,815		
	2	Savings and temporary cash investments					
	3	Accounts receivable >		Spine Company	* <u>* * *</u>		
		Less: allowance for doubtful accounts Pledges receivable		***************************************			
	4	Pledges receivable ▶	2002 A C 100 C 10 A C 1	**** ********************************	*, «		
İ		Less: allowance for doubtful accounts		fil 300 till addition to the second and the second	The first the second section of the second second second		
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
	•	disqualified persons (attach schedule) (see instructions)					
	7		1 . 1				
	′	Land Boundary for deskild accounts					
s	8	Inventories for sale or use					
ssets	9						
Ass		Prepaid expenses and deferred charges			<u></u>		
•	10a	Investments—U.S. and state government obligations (attach schedule)					
Ì	b	Investments—corporate stock (attach schedule)					
	C	Investments—corporate bonds (attach schedule)	5 A SACROSCO A COMPANSA A COMPANS	MONTENE ENTRE DA LA SE L	1 - A. 7 - A 12 - 2 80 10 80		
	11	Investments—land, buildings, and equipment basis	Service Control				
		Less accumulated depreciation (attach schedule)					
	12	Investments—mortgage loans					
	13	Investments—other (attach schedule)	. Ca. 70. 40. 47. Bag (a abita may a similar may a simila	500.4. V. 4.	.,		
	14	Land, buildings, and equipment basis	94 . At June 9		· ··· · · · · · · · · · · · · · · · ·		
	ł	Less accumulated depreciation (attach schedule)			,		
	15	Other assets (describe					
	16	Total assets (to be completed by all filers—see the					
		ınstructions. Also, see page 1, item l)	710,362	718,815	718,815		
	17	Accounts payable and accrued expenses					
S	18	Grants payable					
Liabilities	19	Deferred revenue					
bili	20	Loans from officers, directors, trustees, and other disqualified persons			i, 18 24 '		
ia	21	Mortgages and other notes payable (attach schedule)					
_	22	Other liabilities (describe					
	23	Total liabilities (add lines 17 through 22)	0	0	**************************************		
(D		Foundations that follow SFAS 117, check here					
alances		and complete lines 24 through 26 and lines 30 and 31.					
an	24	Unrestricted					
3al	25	Temporarily restricted					
<u>Б</u>	26	Permanently restricted			The state of the s		
or Fund B		Foundations that do not follow SFAS 117, check here			La Contract		
Ē		and complete lines 27 through 31.					
ō	27	Capital stock, trust principal, or current funds					
ets	28	Paid-ın or capital surplus, or land, bldg, and equipment fund					
SS	29	Retained earnings, accumulated income, endowment, or other funds	710,362	718,815			
Net Assets	30	Total net assets or fund balances (see instructions)	710,362	718,815			
<u></u>	31	Total liabilities and net assets/fund balances (see			X. C.		
_		ınstructions)	710,362	718,815	» * * . · ·		
Pa	ırt III	Analysis of Changes in Net Assets or Fund Balances					
1	Total	net assets or fund balances at beginning of year—Part II, column (a)), line 30 (must agree	with			
		of-year figure reported on prior year's return)	· · · · · · · · · · · · · · · · · · ·	E .	710,362		
2	Enter	amount from Part I, line 27a		2	-11,012		
3	Other	increases not included in line 2 (itemize) Increase in FMV		3	19,465		
4		nes 1, 2, and 3		4	718,815		
5		eases not included in line 2 (itemize)		5			
_6		net assets or fund balances at end of year (line 4 minus line 5)—Par	t II, column (b), line 3	30 . 6	718,815		
		· · · · · · · · · · · · · · · · · · ·			Form 990-PF (2014)		

Part	V Capital Gains an	d Losses for Tax on Investm	ent Income				
	(a) List and describe to 2-story brick wareho	he kind(s) of property sold (e.g., real estate, buse, or common stock, 200 shs MLC Co.)		(b) How acquired PPurchase DDonation		ate acquired o , day, yr)	(d) Date sold (mo , day, yr)
1a	Capital gain from Oaktree	rom Oaktree					
b							
<u>c</u>							
d	1						
е	_ 	The state of the s	<u>-</u>				
	(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale						n or (loss) f) minus (g)
a	138			·-			138
b				-	<u> </u>		
<u>c</u>			· · ·				
<u>u</u>							
	Complete only for assets st	howing gain in column (h) and owned	by the foundation	on 12/31/60			
		(j) Adjusted basis		ess of col (i)			(h) gain minus less than -0-) or
	(i) FM V as of 12/31/69	as of 12/31/69		ol (j), if any			om col (h))
а							138
b							
С							
d							
е							
2	Capital gain net income or	r (net canital loss)	also enter in Pa , enter -0- in Pa	•	2		982
3		n or (loss) as defined in sections 1					
	If gain, also enter in Part I	, line 8, column (c) (see instruction	ıs). If (loss), en	ter -0- ın 🏻 🚶			
					3		0
Part		der Section 4940(e) for Reduvate foundations subject to the sec					
Was t	tion 4940(d)(2) applies, leav he foundation liable for the s," the foundation does not	ve this part blank. section 4942 tax on the distributab qualify under section 4940(e). Do	ole amount of a	ny year in the base	e perio	d?	☐ Yes ☒ No
1	Enter the appropriate amo	ount in each column for each year;	see the instruc	tions before makir	ng any	entries	·
	(a) Base period years	(b)		(c) of noncharitable-use as		-	(d) tribution ratio
Cal	endar year (or tax year beginning in 2013)				(col (b)	divided by col (c))
	2013		,915 ,863		2,448 2,873		0 047461
	2012		2,908		3,919		0 053298 0 048831
	2010		,372		3,031		0 046962
	2009		3,976		8,549		0 029259
	-						
2	Total of line 1, column (d)				—	2	0 225811
3	_	for the 5-year base period—divide					
	number of years the found	dation has been in existence if less	than 5 years	• • • • • • •	· ·	3	0 045162
4	Enter the net value of non	charitable-use assets for 2014 from	m Part X, line 5	5	.	4	724,402
5	Multiply line 4 by line 3 .					5	32,715
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)				6	222
7	Add lines 5 and 6				.	7	32,937
8		ons from Part XII, line 4				8	33,071
	Part VI instructions	ter than line 7, check the box in Pa	art VI, line 1b, a	and complete that	part us	ing a 1% tax	rate See the

Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see insti	uctic	ons)			
1a	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	1		~	222	
	here ► X and enter 1% of Part I, line 27b				-	1
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			···		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2			0	
3	Add lines 1 and 2	3			222	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5			222	
6	Credits/Payments:		,	γ.		5 X
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 34	1		×		300
b	Exempt foreign organizations—tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868) 6c 400					, · .
_d	Backup withholding erroneously withheld				: :	
7	Total credits and payments. Add lines 6a through 6d	7			434	<u> </u>
8 9	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<u>8</u> 9				├
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			212	+
11	Enter the amount of line 10 to be Credited to 2015 estimated tax Page 12 Refunded	11			0.	-
	VII-A Statements Regarding Activities					<u> </u>
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Γ		Yes	No
	participate or intervene in 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 definition)?			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any material	s			, ,	
	published or distributed by the foundation in connection with the activities.				,	<u>~</u> :
C	Did the foundation file Form 1120-POL for this year?		-	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		-			
	(1) On the foundation. > \$ (2) On foundation managers. > \$		lõ		**************************************	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impos	ed	>8			22 h
2	on foundation managers. \$ Has the foundation engaged in any activities that have not previously been reported to the IRS?		".	<u> </u>	 الله مد	
2	If "Yes," attach a detailed description of the activities.			2		X
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? <i>If "Yes," attach a conformed copy of the changes</i> .			3	in it is	X
4a	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	N/A	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		Х
	If "Yes," attach the statement required by General Instruction T.				6	2, 4
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or			٠		,
	By state legislation that effectively amends the governing instrument so that no mandatory directions the	at				
	conflict with the state law remain in the governing instrument?		1	6	Χ_	<u> </u>
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	Χ	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					•
_	NV			`		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gene	raı			;	ļ
9	(or designate) of each state as required by General Instruction G? If "No," attach explanation		-	8b	X	
5	or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)?	-	-	 		
	"Yes," complete Part XIV	**		9	х	1
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the	neir	-	∸	^	
	names and addresses.		.	10		×

Part	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		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	X	
14	The books are in care of ▶ Benlor Rivera Telephone no. ▶ 702-734	-3700		
	Located at ▶ 8960 Spanish Ridge Ave. Las Vegas NV ZIP+4 ▶ 89148			
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 2014, did the foundation have an interest in or a signature or other authority		Yes	No
. •	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If	3 3 4 C	3674V	20°23
	"Yes," enter the name of the foreign country			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	20 X X X XX	8060A X vS	10 0000 20
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	2 1 3 W	Yes	No
1a	During the year did the foundation (either directly or indirectly):	¥ .50	18 1 C	10.3
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	3 47		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	****		% 2/4 % 2/6/6 √
	disqualified person?	1.28		* * * * * * * * * * * * * * * * * * *
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	4 800		×
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1	*** 4 4	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	512	1900 -1" 2000 -	
	the benefit or use of a disqualified person)?	46832		* 44 v
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	(3 § ½)	37 E.) 2 200 E
	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.)	, , ,		3 ; · *******
þ	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in	19.00	» i	î Xer
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here	1b	N/A	A 2 %
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		2	27 E
·	were not corrected before the first day of the tax year beginning in 2014?	1c	B. L. Str. W.	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1.5	8% X*	3.75
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	28830	er, NZ (
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and			. ****
	6e, Part XIII) for tax year(s) beginning before 2014?	385%	3.0	
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			3.4
b	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	100		
	all years listed, answer "No" and attach statement—see instructions.)	2b	N/A	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		30 *** 	12.34
_	► 20, 20, 20, 20	\$ 1 S 1 S 1 S 1 S 1 S 1 S 1 S 1 S 1 S 1		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	140		
1	at any time during the year?			Marian S
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or	1003	﴾ الأعدر عداد المادي الماد	
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the	100 TOV 1000		
	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 Schodule C. Form 4720 to determine if the		777	
	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 2014.)	26	NI/A	Eat.
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b	N/A	
4a b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a	*	X
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b	(E) 4.	X
				<u>. ~.</u>

Part	VII-B Statements Regarding Activities			1720 N	lay Be Re	quire	d (contin	ued)		
5a	During the year did the foundation pay or incur any (1) Carry on propaganda, or otherwise attempt to it			section	4945(e))?		☐ Yes	X No	1.24	
	(2) Influence the outcome of any specific public ele- directly or indirectly, any voter registration drive					☐ Yes	X No			
	(3) Provide a grant to an individual for travel, study	, or oth	er simılar pur _l	ooses?			Yes	X No		in the second
	(4) Provide a grant to an organization other than a section 4945(d)(4)(A)? (see instructions)					ın	Yes	X No	1	
	(5) Provide for any purpose other than religious, ch purposes, or for the prevention of cruelty to chil			terary, o	or education	nal 	☐ Yes	X No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the to Regulations section 53.4945 or in a current notice		•	-		•		d in	5b	N/A
С	Organizations relying on a current notice regarding If the answer is "Yes" to question 5a(4), does the forbecause it maintained expenditure responsibility for	oundation of the gr	on claim exentant?	nption f	rom the tax		Yes	► □ No		
	If "Yes," attach the statement required by Regulation									
6a	Did the foundation, during the year, receive any fur on a personal benefit contract?					ns · ·	Yes	X No		
b	Did the foundation, during the year, pay premiums, If "Yes" to 6b, file Form 8870.	directly	or indirectly,	on a p	ersonal ber	efit cor	itract?	•	6b	X
7a b	At any time during the tax year, was the foundation a pa If "Yes," did the foundation receive any proceeds o						Yes action?	X No	7b	N/A
Part	Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors									
1	List all officers, directors, trustees, foundation	manage	ers and their	compe	ensation (s	ee inst	ructions).			
	(a) Name and address	hou	e, and average rs per week ed to position	`´(If ı	mpensation not paid, nter -0-)	emple	Contribution byee benefit erred compe	plans		ense account, allowances
8960	Liang Spanish Ridge Las Vegas, NV 89148	Presid	ent/Treasurer 5 00							
8960	k Liang Spanish Ridge Ave. Las Vegas, NV 89148		ary/Director 1.00							
	r Rivera	Ass. S	ecretary							
8960	Spanish Ridge Las Vegas, NV 89148		1.00	-	<u>-</u>					
2	Compensation of five highest-paid employees (other t	han those in	cluded	on line 1—	see ins	structions	s). If no	ne, ent	er
	(a) Name and address of each employee paid more than \$50,000		(b) Title, and a hours per w devoted to po	reek	(c) Comper	sation	(d) Contribi employee plans and compens	benefit deferred		ense account, allowances
NONE										
						·				
Total	number of other employees paid over \$50,000	.			·			•	_	

Part VIII	Information About Officers, Directors, Trustees, Founda and Contractors (continued)	tion Managers, Highly Paid En	nployees,
3 Five h	ighest-paid independent contractors for professional services (se	e instructions). If none, enter "NON	IE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
			·
 		· · · · · · · · · · · · · · · · · · ·	-
Total number	of others receiving over \$50,000 for professional services		
Part IX-A	Summary of Direct Charitable Activities		
	tion's four largest direct charitable activities during the tax year. Include relevant statistical in and other beneficiaries served, conferences convened, research papers produced, etc.	nformation such as the number of	Expenses
1 None			
		·	
2			
3			
4			
•			
Part IX-B	Summary of Program-Related Investments (see instruc	tions)	
Describe the t	wo largest program-related investments made by the foundation during the tax year on lines		Amount
1			
		••••	
2			
All other proor	am-related investments. See instructions		
3			
•			
Total. Add lin	es 1 through 3		0

Part 2	Minimum Investment Return (All domestic foundations must complete this part. Foreign	found	ations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	\$1.50	
	purposes:	€ 18	
а	Average monthly fair market value of securities	1a	735,433
b	Average of monthly cash balances	1b	
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	735,433
е	Reduction claimed for blockage or other factors reported on lines 1a and	1 44	
	1c (attach detailed explanation)	ائستا	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	735,433
4	Cash deemed held for charitable activities. Enter 1 ½ % of line 3 (for greater amount, see		
	ınstructions)	4	11,031
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	724,402
6	Minimum investment return. Enter 5% of line 5	6	36,220
Part 2	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating		
	foundations and certain foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	36,220
2a	Tax on investment income for 2014 from Part VI, line 5	* (
b	Income tax for 2014. (This does not include the tax from Part VI.) 2b	*	
С	Add lines 2a and 2b	2c	222
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	35,998
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	35,998
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		-
	line 1	7	35,998
Dort		<u> </u>	· · ·
Fart	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	33,071
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		·
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	<i>*</i>	
а	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	33,071
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 (see instructions)	5	222
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	32,849
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whetl	ner the f	oundation
	qualifies for the section 4940(e) reduction of tax in those years.		

1 Distributable amount for 2014 from Part XI,	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
line 7	% \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	· 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1	*2°^/ 5 /#*\$6 (#) \$ ^	35,998
2 Undistributed income, if any, as of the end of 2014	* 7	¥	1, 1, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2,	y (3)
a Enter amount for 2013 only	× >	,	32,061	•
b Total for prior years: 20 10 , 20 11 , 20 12	\$	30,772	02,001	
3 Excess distributions carryover, if any, to 2014:			*	
a From 2009	· ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	,	05^	12 tor.
b From 2010		· Will		* 9 %
c From 2011		** (%	* : 22	3.3% E.
d From 2012		**	,	
e From 2013	,			
f Total of lines 3a through e	0			
4 Qualifying distributions for 2014 from Part XII,		\ \		,
line 4: ▶ \$ 33,071			* ^ * 2 2 2 2 4	
a Applied to 2013, but not more than line 2a		*	32,061	, , , , , , , , , , , , , , , , , , ,
b Applied to undistributed income of prior years	3	•*	`	*
(Election required—see instructions)	,,3,8		<i></i>	₹ 5,
c Treated as distributions out of corpus (Election	73:07		,	4.5.
required—see instructions)				
d Applied to 2014 distributable amount	W/28/2 ~ C 2 4/2 1 .		* * * * * * * * * * * * * * * * * * *	1,010
e Remaining amount distributed out of corpus	*** **	5 Y Y Y Y	4 + 2 1 2 7	1,010
5 Excess distributions carryover applied to 2014.		,	,	
(If an amount appears in column (d), the same	3 .0.0.000	7 1 500	5 % Z.	A V
amount must be shown in column (a).)				
6 Enter the net total of each column as				
indicated below:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0		, , , , , , , , , , , , , , , , , , , ,	
b Prior years' undistributed income. Subtract	277 1 1/2+45	**************************************		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
line 4b from line 2b	**************************************	30,772		
c Enter the amount of prior years' undistributed		30,772	, , , , , ,	2 x 3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
income for which a notice of deficiency has				
been issued, or on which the section 4942(a)				
tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable		*		3 \$ *\$ ***
amount—see instructions	1	30,772		, Ā
e Undistributed income for 2013. Subtract line	10 (S. S. S. Z.	* * * * * * * * * * * * * * * * * * * *		
4a from line 2a. Taxable amount—see				
instructions			o	
f Undistributed income for 2014. Subtract lines		/ % Y	(- 18. XX
4d and 5 from line 1. This amount must be	× ×	* * *	,	
distributed in 2015	< 3 \$4 \$6.00	``````````````````````````````````````	· •mi - 1	34,988
7 Amounts treated as distributions out of corpus		,	` \$	^ ,>
to satisfy requirements imposed by section		3. 3. M.	* * * * * * * * * * * * * * * * * * *	
170(b)(1)(F) or 4942(g)(3) (Election may be		****	· **	* *
required—see instructions)		***	,	
8 Excess distributions carryover from 2009 not		\		<u> </u>
applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2015.		4,		
Subtract lines 7 and 8 from line 6a		» «.	•	3,
10 Analysis of line 9:				
a Excess from 2010				
b Excess from 2011	┪			
c Excess from 2012	┪			
d Excess from 2013	┪			
e Excess from 2014	1			

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

Any submission deadlines:

None

N/A

factors:

Form 990-PF (2014)

Part XV Supplementary Information (continuous)	nued)			
3 Grants and Contributions Paid During t		ed for Ful	ture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	COMMISSION	
a Paid during the year				
LUNHS Alumni USA Inc			High school	500
Holy Names University		1	Holy Name University	1,000
Tioly Names Offiversity			l loly Ivallie Offiversity	1,000
			-	
Sisters of the Holy Names			Support poor and disenfranchised	500
Children of China Pediatric Foundation			Health Care	1,000
Cyrus Tang Foundation			Shengze hospital	30,000
Cyrus rang r candation			Sherigze hospital	30,000
	1			
			1	
			İ	
Total				33,000
b Approved for future payment				
]
			1	
			1	
Total		<u> </u>	▶ 3h	

Par	τχνι	-A Analysis of Income-Producing Ac	tivities				
Ente	r gros	s amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by sect	on 512, 513, or 514	
	-						(e) Related or exempt
			_ (a)	(b)	(c)	(d)	function income
1	Prog	ram service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions)
•	_	Tam Service revenue.					
			-				
	b _						
			1				
	е —						
	· -						
	' -			-	 		-
	-	Fees and contracts from government agencies					
2		bership dues and assessments					
3	Intere	est on savings and temporary cash investments .			14	183	
4	Divid	dends and interest from securities			14	21,158	
5	Net i	rental income or (loss) from real estate:	ĿĸĨŶĸŔŧŸ Ŧ				
		Debt-financed property				(2 	
					 		
_		Not debt-financed property					
6		rental income or (loss) from personal property			1		
7		er investment income					
8	Gain	or (loss) from sales of assets other than inventory			18	844	
9	Net i	income or (loss) from special events					
10		ss profit or (loss) from sales of inventory					
11		er revenue: a					
• •			<u> </u>		 		
			<u> </u>		 		
	c _			ļ			
	d _						
	е		L				
40	Subt	total. Add columns (b), (d), and (e)		0		22,185	0
12							
13	Tota	II. Add line 12, columns (b), (d), and (e)				13	22,185
13 (Se	Tota e work	II. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations					
13 (Sec	Tota e work rt XV	al. Add line 12, columns (b), (d), and (e)	 s.) Accomplishm	ent of Exemp	t Purposes	13	
13 (Sec Pa	Tota e work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185
13 (Sec Pa	Tota e work rt XV	al. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185
13 (Sec Pa	Tota e work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185
13 (Sec Pa	Tota e work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185
13 (Sec Pa	Tota e work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185
13 (Sec Pa	Tota e work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185
13 (Sec Pa	Tota e work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185
13 (Sec Pa	Tota e work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185
13 (Sec Pa	Tota e work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185
13 (Sec Pa	Tota e work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185
13 (Sec Pa	Tota e work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185
13 (Sec Pa	Tota e work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185
13 (Sec Pa	Tota e work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185
13 (Sec Pa	Tota e work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185
13 (Sec Pa	Tota e work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185
13 (Sec Pa	Tota e work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185
13 (Sec Pa	Tota e work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185
13 (Sec Pa	Tota e work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185
13 (Sec Pa	Tota e work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185
13 (Sec Pa	Tota e work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185
13 (Sec Pa	Tota e work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185
13 (Sec Pa	Tota e work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185
13 (Sec Pa	Tota e work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185
13 (Sec Pa	Tota e work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185
13 (Sec Pa	Tota e work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185
13 (Sec Pa	Tota e work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185
13 (Sec Pa	Tota e work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185
13 (Sec Pa	Tota e work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) Accomplishm	ent of Exemp	t Purposes	13	22,185

Part >	(VII			ers To and Transaction	s and Rel	ationship	s With N	oncharitat	le		
		Exempt Org					-	<u> </u>		т.	
		_		age in any of the following w	-	_			_	Yes	No
		• •	e Code (other than sec	tion 501(c)(3) organizations)	or in section	on 527, rela	ting to poli	tical			
	-	nızatıons?								- 1	
а	Tran	sfers from the rep	orting foundation to a r	noncharitable exempt organi	zation of						
		Cash							(1)		Х
		Other assets						1 <u>1</u>	(2)		X
		er transactions									
			a noncharitable exemp	-					(1)	_	<u> </u>
	• •		ets from a noncharitable	. •				_	(2)		<u> </u>
			equipment, or other as	ssets				_	(3)		<u>X</u>
		Reimbursement ar	_					_	(4)		X
		oans or loan guar						_	(5)		Х
			•	or fundraising solicitations					(6)		_X_
				other assets, or paid emplo					С		Х
		•	•	lete the following schedule Co		•					
				en by the reporting foundation, , show in column (d) the value							
(a) Line		(b) Amount involved		ritable exempt organization				ns, and sharing	агтапд	emen	ts
	\Box									-	
					-			•			
					·						
	_										
	_										
	desc	cribed in section 5	•	d with, or related to, one or iter than section 501(c)(3)) or			nizations	☐ Ye	es 🗆] N	0
		(a) Name of organ		(b) Type of organization			(c) Description	on of relationshi			
								•			
		· · ·		·							
-											
				n, including accompanying schedules and s		•	nowledge and be	lief, it is true,			
Sign	conte	ect, and complete Declarati	on of preparer (other than taxpayer	r) is based on all information of which prepa	rer has any know	ledge		May the IRS dis	cuss the	ıs retur	n
Here		Ju	(١٩٠١	11 - 13 - 15 Ass	sistant Trea	surer		with the prepare			_
	Sig	nature of officer or trus		Date Title				(see instruction:	5)7	Yes	No
D-:-		Print/Type preparer	's name	Preparer's signature		Date	Chec	k T if PTII	1		
Paid		_						employed			
Prepa		I Firm's name ■					Firm's EIN				
Use (וחכ	Firm's address					Phone no				

Schedule B

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

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs gov/form990.

ZEE FOUNDATION	26-1083886						
Organization type (check of	ne)·						
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						
· · ·	s covered by the General Rule or a Special Rule .						
Note. Only a section 501(c) instructions.	(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See						
General Rule							
	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or property) from any one contributor. Complete Parts I and II. See instructions for determining a ontributions.						
Special Rules							
regulations under s 13, 16a, or 16b, an	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % support test of the ections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line d that received from any one contributor, during the year, total contributions of the greater of (1) the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II						
contributor, during	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one he year, total contributions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, nal purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III						
contributor, during contributions totale during the year for General Rule appl	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
990-EZ, or 990-PF), but it r	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, nust answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						

Name of organization
ZEE FOUNDATION
Employer identification number
26-1083886

Part I	Contributors (see instructions). Use duplicate copie	es of Part I if additional space is r	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province. Foreign Country:	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province. Foreign Country.	\$	Person Payroll Occupation Payroll Payroll Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province. Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country:	\$	Person Payroll Occupied Part II for noncash contributions (

Name of organization
ZEE FOUNDATION

Employer identification number 26-1083886

Part II	Noncash Property (see instructions). Use duplicate	copies of Part II if additional spa	ce is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of or			Employer identification number 26-1083886
Part III	Exclusively religious, charitable, etc., con (10) that total more than \$1,000 for the year the following line entry. For organizations cor contributions of \$1,000 or less for the year. (Use duplicate copies of Part III if additional seconds.)	or from any one contributor. Comp npleting Part III, enter the total of ex Enter this information once. See ins	ibed in section 501(c)(7), (8), or olete columns (a) through (e) and occlusively religious, charitable, etc.,
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and ZIF	(e) Transfer of gift P + 4 Relation	ship of transferor to transferee
(a) No.	For. Proy Country		
from Part l	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and ZII	(e) Transfer of gift	ship of transferor to transferee
	For Prov Country		Simp of transferor to transferor
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and ZII	(e) Transfer of gift	ship of transferor to transferee
	Transferee & Hame, address, and En		iship of transferor to transferor
(a) No.	For Prov. Country		
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	<u> </u>
	Transferee's name, address, and ZII	P + 4 Relation	ship of transferor to transferee
	For. Prov Country		

Part I, Line 6 (990-PF) - Gain/Loss from Sale of Assets Other Than Inventory

	Terro	<u>5</u> 1					_
Net Gain or Loss	8				Net Gain	orLoss	
Net						Adjustments	
Other	0	0				Depreciation	
Cost, Other Basis and Exnenses				Expense of Sale	and Cost of	Improvements	
	₩,	0			Valuation	Method	
Gross					Cost or	Other Basis	
Totals	Capital Gains/Losses	Other sales			Gross Sales	Price	
	Ö				Date	Sold	
					Acquisition	Method	
		:			Date	Acquired	
			Check X if	Purchaser	Sa	Business	
						Purchaser	
tai o m A	11					CUSIP #	
	Long Term CG Distributions	Short Term CG Distributions				Description	
				Check X	to include	in Part IV	

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

	20	20	0
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income
Other income from Oaktree Capital	20	20	

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

		127	127	0	0
	Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	Real estate tax not included in line 20	per Books	income	ivet income	Fulposes
2	Tax on investment income				<u> </u>
3	Income tax	,		""\ 	······································
4	Foreign tax paid	127	127		

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

		90	19	0	71
		Revenue and Expenses	Net Investment	Adjusted Net	Disbursements for Charitable
	Description	per Books	Income	Income	Purposes
1	Annual list	25			25
2	Las Vegas Journal	46			46
3	Portfolio deductions from Oaktree Capital	19	19		

Part IV (990-PF) - Capital Gains and Losses for Tax on Investment Income

ZEE FOUNDATION

Long Term CG Distributions	\$	[
Short Term CG Distributions					138	0	0	0	138	0	0	_	138
			-					Cost or Other			Adjusted Basis		Gains Minus Excess
		Acquisition	Date	Date	Gross	Depreciation		Basis Plus		F.M V as of	as of	Excess of FMV	of FMV Over Adjusted
Description of Property Sold	CUSIP#	Method	Acquired	Pos	Sales Pnce	Allowed	Adjustments	Expense of Sale	Gain or Loss	12/31/69	12/31/69	Over Adj Basis	Basis or Losses
1 Capital gain from Oaktree					138			Ö	138	0	0)	138

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

Expense	scount						,	,
	Benefits /		,					
	Per Week Compensation	8			8	Q	9 9	Q 0
Avg Hrs	Per Week	re 5.00			100			
	Tile	President/Tre	asurer	asurer	asurer Secretary/Dir	asurer Secretary/D ector	Secretary/D ector	Secretary/D) ector Ass. Secretary
	Foreign Country							
	Zip Code	89148			89148	89148	89148	89148 89148
	State	A			2			
	ş.	Las Vegas			Las Vegas	Las Vegas	Las Vegas Las Vegas	Las Vegas Las Vegas
	Street	8960 Spanish Ridge			8960 Spanish Ridge Ave	8960 Spanish Ridge Ave	8960 Spanish Ridge Ave 8960 Spanish Ridge	8960 Spanish Ridge Ave 8960 Spanish Ridge
Check X	if Business	3				8	3	8 3
	Name	Stella Liang			Patnck Lang	Patrick Lang	Patrick Lang Benlor Rivera	Patnck Lang Benlor Rivera
			_	-	-	7	- 2	- 2