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Form 990-PF

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

OMB No. 1545-0052

2014

Department of the Treasury Internal Revenue Service

► 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	cal	enda	year 2014, or tax year beginning	10/01 , 2014	, and ending 9/	' 3(, 2015	
				•	I A	Ą	Employer identification num	nber
			TH FOUNDATION		<u> </u>	_	95-5004033	
80	0 1	V VICT	SHIRE BLVD., SUITE 1300 ELES, CA 90017			В	Telephone number (see insta 213 630-6500	ructions)
тО	S 1	TING	SLES, CA 90017		-			
				- page		C	If exemption application is	pending, check here
G	Che	ck al	I that apply: Initial return	Initial return of a form	mer public charity	D	1 Foreign organizations, chec	k here ▶
			Final return	Amended return				
			Address change	Name change			2 Foreign organizations meet here and attach computation	ing the 85% test, check
Н	Che			501(c)(3) exempt private t			·	
	L		ction 4947(a)(1) nonexempt charitab			E	If private foundation status under section 507(b)(1)(A)	
			t value of all assets at end of year II, column (c), line 16)		ash X Accrual			L-J
	(<i>iioi</i> . ►\$	i i ai t	· · · · · · · · · · · · · · · · · · ·	Other (specify) rt I, column (d) must be of		F	If the foundation is in a 60- under section 507(b)(1)(B)	
Pa		ΙΛ:	282, 965, 850. (Panalysis of Revenue and		1	_	,,,,,,	
ı a	161		kpenses (The total of amounts in	(a) Revenue and expenses per books	(b) Net investment income		(c) Adjusted net income	(d) Disbursements for charitable
		co	lumns (b), (c), and (d) may not nec	es-	income		income	purposes
		sa (c.	rily equal the amounts in column (a ee instructions).))				(cash basis only)
		1	Contributions, gifts, grants, etc, received (attach schedule).	21,989.				
		2	Ck ► If the foundn is not required to attach Sch I			_		1
		_				╗		,
p.e		3	Interest on savings and temporary cash investments Dividends and interest from securities	_,,	1,045,988		<u> </u>	
U 107		4 5 a	Gross rents	5,477,598.	5,477,598	٥.		<u> </u>
7			Net rental income or (loss)					
⊃. R	•	6 a	Net gain or (loss) from sale of assets not on line 10	14,467,515.	· · · · · ·			'
. F		b	Gross sales price for all assets on line 6a	5.				
MAK		7	Capital gain net income (from Part IV, line 2).		14,467,515	5.		,
• • • • • • • • • • • • • • • • • • • •		8	Net short-term capital gain					
. U ~		9	Income modifications					
	•	10 a	Gross sales less returns and allowances					į
Ξ',		b	Less: Cost of			_		
<u> </u>		_	goods sold			_		
,		_	Other income (attach schedule)					
ادرو			SEE STATEMENT	1 982,514.	982,514	4.		1
		12	Total. Add lines 1 through 11	21,995,604.	21,973,615		0.	
$\overline{}$		-13-	Compensation of officers, directors, trustees, e	911,726.	364,690).		547,036.
		₹E	Other employeersalaries and wages Pension plans, employee benefits	217,946.				130,768.
1	\Box	.15.	Perision plans, employee benefits	127,543.	51,017	1.		76,526.
893	A	16a 14 A D	Legal fees (attach schedule) SEE . ST. Accounting and Cattach Catt	.2 43,507.	26.425	_		43,507.
œ	M	MMIN	Other prof fees (attack) SEE ST	.3 52,850. .4 3,086,496.	26,425 3,086,496			26,425.
	_N		Other prof. fees (attach (CP)) SEE . ST.	3,000,490.	3,000,490	٠.		
OPER	*	6	Tales (Ather) schedule (see Instrs) . SEE . STM	5 181,983.	21,522	2.		31,890.
<u>-</u> R−-	-Ř	19	Depreciation (attach					52,050.
Ą	Ā		sch) and depletion	4,242.	4,242			
Ň G	Ý	20 21	Occupancy	133,372.	61,429			92,143.
	- F	22	Printing and publications	··· <u>16,167.</u>	8,396	ο.		7,771.
A N D	E X	23	Other expenses (attach schedule)				<u> </u>	
-	E		SEE STATEMENT	6 357,636.	166,002	2.		191,634.
	S	24	Total operating and administrative	F 150 660	2 000 000	_		1 148 800
	5	25	expenses. Add lines 13 through 23	5,153,668.	3,877,396	b.	-	1,147,700.
		25 26	Total expenses and disbursements.	13,954,036.				13,954,036.
		26	Add lines 24 and 25	19,107,704.	3,877,396	6.	0.	15,101,736.
		27	Subtract line 26 from line 12:		, , , , , , , , , , , , , , , , , , , ,			
		a	Excess of revenue over expenses	2 007 000				
		L	and disbursements	. 2,887,900.	18,096,219	Δ		
			Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)	'	10,090,213	<i>.</i>	0.	
		-	rejected net moonte (il negative, cittel .p.).	' l	I			

Form 990-PF (2014)

15 Other assets (describe ► SEE STATEMENT 11) 514,968, 528,597, 528,	934 365 620 000
2 Savings and temporary cash investments. 2,547,739. 1,967,365. 1,967, 3 Accounts receivable	365 620 000
2 Savings and temporary cash investments. 2,547,739. 1,967,365. 1,967, 3 Accounts receivable	000
3 Accounts receivable	000
Less: allowance for doubtful accounts	182
4 Pledges receivable Less: allowance for doubtful accounts > 5 Grants receivable 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 7 Other notes and loans receivable (attach sch) Less: allowance for doubtful accounts > 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments — U.S. and state government obligations (attach schedule) b investments — corporate stock (attach schedule). STATEMENT. 7. 164, 258, 633. 145, 848, 182. 145, 848, c investments — corporate bonds (attach schedule). STATEMENT. 8. 30, 933, 461. 29, 825, 014. 29, 825, 11 Investments — land, buildings, and equipment: basis Less: accumulated depreciation (attach schedule) 12 Investments — mortgage loans 13 Investments — other (attach schedule)STATEMENT. 9. 101, 940, 970. 103, 447, 279. 103, 447, 14. Land, buildings, and equipment: basis > 30, 620. Less: accumulated depreciation (attach schedule)	182
Less: allowance for doubtful accounts Grants receivable	182.
S Grants receivable	182.
6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions). 7 Other notes and loans receivable (attach sch). ► Less: allowance for doubtful accounts ► 8 Inventories for sale or use. 9 Prepaid expenses and deferred charges. 10a Investments — U.S. and state government obligations (attach schedule). b investments — corporate stock (attach schedule). STATEMENT 7. c investments — corporate bonds (attach schedule) .STATEMENT 8. 11 Investments — land, buildings, and equipment: basis. Less: accumulated depreciation (attach schedule). 12 Investments — mortgage loans. 13 Investments — other (attach schedule) .STATEMENT 9. 14 Land, buildings, and equipment: basis ► SEE STMT 10 ► 16,761. 13,847. 13,859. 13,859. 15 Other assets (describe ► SEE STATEMENT 11) 514,968. 528,597. 528.	182.
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Less: allowance for doubtful accounts 8 Inventories for sale or use	
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10a Investments — U.S. and state government obligations (attach schedule) b Investments — corporate stock (attach schedule) STATEMENT .7 164,258,633 145,848,182 145,848, c Investments — corporate bonds (attach schedule) STATEMENT .8 30,933,461 29,825,014 29,825, 11	
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c Investments — corporate bonds (attach schedule) .STATEMENT. 8 30, 933, 461. 29, 825, 014. 29, 825, 11 Investments — land, buildings, and equipment: basis	
Investments – land, buildings, and equipment: basis — Less: accumulated depreciation (attach schedule)	
equipment: basis	
(attach schedule)	
12 Investments - mortgage loans	
13 Investments — other (attach schedule) . STATEMENT . 9	
14 Land, buildings, and equipment: basis ►	279
Less: accumulated depreciation (attach schedule) SEE STMT 10 ► 16,761. 13,847. 13,859. 13, 15 Other assets (describe ► SEE STATEMENT 11) 514,968. 528,597. 528.	
15 Other assets (describe ► SEE STATEMENT 11) 514.968. 528.597. 528.	859.
16 Total assets (to be completed by all filers — see the instructions. Also, see page 1, item i)	
	850.
L 17 Accounts payable and accrued expenses 214,568.	
A 18 Grants payable	
20 Loans from officers, directors, trustees, & other disqualified persons	
I 21 Mortgages and other notes payable (attach schedule).	
22 Other liabilities (describe SEE STATEMENT 12) 1,256,305. 899,635.	
E S 23 Total liabilities (add lines 17 through 22)	
Foundations that follow SFAS 117, check here > X and complete lines 24 through 26 and lines 30 and 31.	
N F 24 Unrestricted 299,218,706. 281,351,647.	
E U 7 T N 25 Temporarily restricted	
D 26 Permanently restricted	
Foundations that do not follow SFAS 117, check here . > and complete lines 27 through 31.	
Foundations that do not follow SFAS 117, check here . A and complete lines 27 through 31. Capital stock, trust principal, or current funds	
S N 28 Paid-in or capital surplus, or land, bidg., and equipment fund	
O E 29 Retained earnings, accumulated income, endowment, or other funds.	
R S 30 Total net assets or fund balances (see instructions)	
(see instructions)	-
1 Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with	
end-of-year figure reported on prior year's return) 1 300,196, 2 Enter amount from Part I, line 27a 2 2,887,	717
3. Other increases not included in line 2 (itemize)	
3 Other increases not included in line 2 (itemize) 4 Add lines 1 2 and 3	900.
4 Add lines 1, 2, and 3	900.
3 Other increases not included in line 2 (itemize) ► SEE STATEMENT 13	900. 617. 970.

Part IV Capital Gains and	Losses for Tax on Investmen	t Income			
(a) List and describe 2-story brick warehous	e the kind(s) of property sold (e.g., r se; or common stock, 200 shares ML	eal estate, C Company)	(b) How acquir P — Purchase D — Donation	(month, day, year)	(d) Date sold (month, day, year)
1 a MANAGED PORTFOLIO			P	VARIOUS	VARIOUS
b FROM PASS THROUGH H	ENTITIES		P	VARIOUS	VARIOUS
СС					
d					
<u>e</u>				<u> </u>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa		(h) Gain or (e) plus (f) n	
a 12,471,475.		. 			2,471,475.
b 1,996,040.					1,996,040.
С					
d					
e		 			
	ving gain in column (h) and owned b			(I) Gains (Col	
(i) Fair Market Value as of 12/31/69	Market Value (j) Adjusted basis (k) Excess of column (i) over column (j), if any			gain minus column (than -0-) or Losses (f	rom column (h))
a					2,471,475.
b					1,996,040.
С					
d					
<u>e</u>	<u> </u>			 	
2 Capital gain net income or (ne	et capital loss)	enter in Part I, line 7 er -0- in Part I, line 7			
	—	_	<u> </u>	2 1	<u>4,467,515.</u>
3 Net short-term capital gain or	(loss) as defined in sections 1222(5)) and (6):			
	e 8, column (c) (see instructions). If		- .	3	•
	r Section 4940(e) for Reduce				0.
	oundations subject to the section 4940			16	
(For optional use by domestic private i	outlidations subject to the section 4540	(a) tax on het investment int	Joine.)		
If section 4940(d)(2) applies, leave	this part blank.				
Mos the foundation liable for the co	ction 4942 tax on the distributable a	mount of any year in the h	ase period?	\(\tag{Yes}	X No
	alify under section 4940(e). Do not c	= =	base periou:	🗀 1es	<u>v</u>
	each column for each year; see the ins		entries		
1 Enter the appropriate amount in	each column for each year, see the his		entries.	(4)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	(c) Net value of noncharitable-use as	sets (c	(d) Distribution olumn (b) divided	n ratio by column (c))
2013	14,290,155.	297,09	3 234		0.048100
2012	14,465,130.	279,13			0.051821
2012	13,206,631.	261,83			0.050438
2010	13,362,356.	269,88			0.030430
2009	9,359,595.	253,56			0.036912
2009	9,339,393.	233,30	2,130.		0.000712
2 Total of line 1, column (d)			:	2	0.236782
					0.200.02
number of years the foundation	he 5-year base period — divide the t in has been in existence if less than	5 years		3	0.047356
4 Enter the net value of noncha	ritable-use assets for 2014 from Par	t X, line 5	<u></u>	29	<u>6,478,997.</u>
5 Multiply line 4 by line 3				5 1	<u>4,040,059.</u>
6 Enter 1% of net investment in	come (1% of Part I, line 27b)		١,	5	190 962
6 Enter 1% of net investment in	Come (1 /8 of 1 art I, line 2/bj			-	<u> 180,962.</u>
7 Add lines 5 and 6				7 1	4,221,021.
· • -	rom Part XII, line 4				5,101,736.
If line 8 is equal to or greater that Part VI instructions.	an line 7, check the box in Part VI, line	1b, and complete that part	using a 1% ta	x rate. See the	

10 Form 990-PF (2014)

			_		
_	990-PF (2014) UNIHEALTH FOUNDATION 95-5004033		P:	age 4	
	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instruction	s)			
7 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 instrs)				
t	Domestic foundations that meet the section 4940(e) requirements in Part V,	1	80,9	<u>6Ζ.</u>	
	check here ► X and enter 1% of Part I, line 27b				
C	: All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.	
3	Add lines 1 and 2	1	80,9		
4				0.	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	11	80,9	62.	
	Credits/Payments:				
	2014 estimated tax pmts and 2013 overpayment credited to 2014				
	Exempt foreign organizations — tax withheld at source				
	Tax paid with application for extension of time to file (Form 8868)				
	Backup withholding erroneously withheld	_			
7 Total credits and payments. Add lines 6a through 6d					
8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached					
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed					
1	Enter the amount of line 10 to be: Credited to 2015 estimated tax 46,503. Refunded 11			<u>0.</u>	
	t VII-A Statements Regarding Activities		V		
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1 a	Yes	No X	
Ł	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1 b		Х	
	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.				
•	Did the foundation file Form 1120-POL for this year?	1 c		Х	
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation				
	foundation managers ▶\$0 .				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		_ X	
	If 'Yes,' attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3	х		
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X	
Ł	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	4 b	N	/A	
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.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	.			
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	х		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV.	7	X		
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	CA				
t	of the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation	8 b	Х		

TEEA0304L 06/16/14

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If 'Yes,' complete Part XIV

BAA

Par	t VII-A	Statements Regarding Activities (continued)					
11	At any ti within th	me during the year, did the foundation, directly or indirectly, own a controlled entity e meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)			11		х
12		oundation make a distribution to a donor advised fund over which the foundation or a disqualified persoprivileges? If 'Yes,' attach statement (see instructions).			12		x
13		oundation comply with the public inspection requirements for its annual returns and exemption		tion?	13	X	
		address					
14		s are in care of ► KATHLEEN SALAZAR Telephone			30-6	500	
		at > 800 WILSHIRE BLVD., STE 1300 LOS ANGELES CA ZIP + 4 >	900		_NT/7		
15		4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here rethe amount of tax-exempt interest received or accrued during the year		4	.N/A	·	N/A
16	At any tir bank, se	ne during calendar year 2014, did the foundation have an interest in or a signature or other authority ocurities, or other financial account in a foreign country?	over a		16	Yes	No X
		instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 name of the foreign country	.1). If 'Ye	es,'		_	
Par		Statements Regarding Activities for Which Form 4720 May Be Required					
_		n 4720 if any item is checked in the 'Yes' column, unless an exception applies.			L	Yes	No
1 a	•	ne year did the foundation (either directly or indirectly):		[c]			
	•		Yes	X No			
	(2) Borre	ow money from, lend money to, or otherwise extend credit to (or accept it from) a	Yes	X No	l. 1		
		ish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			
			Yes	X No			
	(5) Tran for th	sfer any income or assets to a disqualified person (or make any of either available ne benefit or use of a disqualified person)?	Yes	X No		İ	
	(6) Agre	e to pay money or property to a government official? (Exception. Check 'No' if the lation agreed to make a grant to or to employ the official for a period after termination vernment service, if terminating within 90 days.).	Yes	X No			
ь				<u></u>			
•		swer is 'Yes' to 1a(1)-(6), dıd any of the acts fail to qualify under the exceptions described in ons section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)			1 ь	N	/A
	Organiza	tions relying on a current notice regarding disaster assistance check here	►				1
c	Did the f	oundation engage in a prior year in any of the acts described in 1a, other than excepted acts, enot corrected before the first day of the tax year beginning in 2014?			1 c	-	х
2	Taxes or private o	failure to distribute income (section 4942) (does not apply for years the foundation was a perating foundation defined in section 4942(j)(3) or 4942(j)(5)):					
a	At the er	d of tax year 2014, did the foundation have any undistributed income (lines 6d	□. ,				
		Part XIII) for tax year(s) beginning before 2014?	Yes	X No			
		st the years ► 20 , 20 , 20					
b	(relating	e any years listed in 2a for which the foundation is not applying the provisions of section 4942 to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942 (listed, answer 'No' and attach statement — see instructions.)	a)(2) to		2 b	NT.	/A
c	•	existing and a section 4942(a)(2) are being applied to any of the years listed in 2a, list the years h					
		, 20 , 20 , 20					
3 a	Did the f	pundation hold more than a 2% direct or indirect interest in any business	Yes	X No			
b	or disqua	did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation alified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approve ommissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or pse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to e if the foundation had excess business holdings in 2014.)	d d	J	3 b	N_N	/A
4 a	Did the f	oundation invest during the year any amount in a manner that would jeopardize its e purposes?			4a		х
	- Did +b - 4	numberion make any investment in a prior year (but after December 21, 1050) that could					
to	ie the tax y the tax y	oundation make any investment in a prior year (but after December 31, 1969) that could be its charitable purpose that had not been removed from jeopardy before the first day of ear beginning in 2014?	<u>.</u>	<u> </u>	4b		x
BAA					rm 99	0-PF	(2014)

Part VII-B Statements Regarding Activit		4720 May Be Req	uired (continued)				
5 a During the year did the foundation pay or incu	•						
(1) Carry on propaganda, or otherwise attempt			ليا ليا	No			
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?							
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	··· · Yes X	No			
(4) Provide a grant to an organization other to in section 4945(d)(4)(A)? (see instructions	han a charitable, etc, ors)	ganization described	Yes X	No			
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific in of cruelty to children	c, literary, or or animals?	Yes X	No			
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53.4945 or ir (see instructions)?	the transactions fail to a current notice regard	qualify under the excep ding disaster assistance	tions	5b N/A			
Organizations relying on a current notice rega				J. HA			
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon If 'Yes,' attach the statement required by Reg	sibility for the grant?		N/A. Yes	No			
6a Did the foundation, during the year, receive an on a personal benefit contract?	ny funds, directly or ınd	rectly, to pay premium	s Yes 🗓	No			
b Did the foundation, during the year, pay prem	iums, dırectly or indırec	tly, on a personal bene	fit contract?	6ы Х			
If 'Yes' to 6b, file Form 8870.							
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes XNo b If 'Yes,' did the foundation receive any proceeds or have any net income attributable to the transaction?							
Part VIII Information About Officers, D and Contractors	irectors, Trustees,	Foundation Manag	jers, Highly Paid E	mployees,			
1 List all officers, directors, trustees, foundation	n managers and their o	ompensation (see inst	ructions).				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account other allowances			
SEE STATEMENT 14			· · · · · · · · · · · · · · · · · · ·				
		810,642.	90,084.	19,200			
2 Compensation of five highest-paid employees (of	har than those included a	on line 1 — see instruction	nc) If none onter 'NONE	•			
(a) Name and address of each employee	(b) Title, and average	(c) Compensation	(d)Contributions to	(e) Expense account			
paid more than \$50,000	hours per week devoted to position	(c) componication	employee benefit plans and deferred compensation	other allowances			
LINDSAY ANGELATS 800 WILSHIRE BLVD, SUITE 1300 LOS ANGELES, CA 90017	SENIOR PROG 0	56,287.	0.	0			
CAROLINE CHUNG		00,2071					
800 WILSHIRE BLVD, SUITE 1300 LOS ANGELES, CA 90017	ADMIN/GRANTS 40	90,658.	13,578.	0.			
KRISTOPHER EAMES 800 WILSHIRE BLVD, SUITE 1300 LOS ANGELES, CA 90017	SPEC PROJ/ADM	92,500.	13,722.	0.			
		,000.					
	·						
Total number of other employees paid over \$50,000							
BAA	TEFANSIGN OF	3/17/14		Form 990-PF (2014)			

Form 990-PF (2014) UNIHEALTH FOUNDATION

95-5004033

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Form 990-PF (2014)

Total. Add lines 1 through 3

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ION

Part VIII Information About Officers, Directors, Trustees, Foundard Contractors (continued)	ındation Managers, Highly Pa	aid Employees,	
3 Five highest-paid independent contractors for professional services (see	instructions). If none, enter 'NONE	•	_
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation	
CANTERBURY CONSULTING			_
660 NEWPORT CENTER DR STE 300	1		
NEWPORT BEACH, CA 92660	INVESTMENT M	MGMT 160,430	ο.
HS MANAGEMENT			
598 MADISON AVENUE, 14TH FLOOR	-		
NEW YORK CITY, NY 10022	investment m	MGMT 233,399	9.
BNY MELLON ASSET SERVICING			_
400 S. HOPE STREET	1		
LOS ANGELES, CA 90071	INVESTMENT M	MGMT 172,43	1.
BARROW, HANLEY, MEWHINNEY & STRAUSS			
2200 ROSE AVENUE, 31ST FLOOR	1		
DALLAS, TX 75201	investment n	MGMT 148,044	4 .
WILLIAM BLAIR INT'L GROWTH FUND	211120212212		÷
10100 SANTA MONICA BLVD., STE 300	┪		
LOS ANGELES, CA 90067	\dashv INVESTMENT N	MGMT 147,95	7 .
Total number of others receiving over \$50,000 for professional services	INVESTMENT I		23
		<u> </u>	==
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis	stical information such as the number of	Expenses	
organizations and other beneficiaries served, conferences convened, research papers produced, etc.			
1 N/A			
2			
3			
4			
Part IX-B Summary of Program-Related Investments (see inst	ructions)		
		Amount	
Describe the two largest program-related investments made by the foundation during	the tax year on lines 1 and 2.	Amount	
<u>N/A</u>			
2			
All ables we were related investments. Con instructions			
All other program-related investments. See instructions.			
3			

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Form 990-PF (2014)

Minimum Investment Return (All domestic foundations must complete this part, Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes: 1 a 298,792,694. **b** Average of monthly cash balances 1 b 1,637,500. c Fair market value of all other assets (see instructions)...... 1 c 563,712. d Total (add lines 1a, b, and c)..... 1 d 300,993,906. e Reduction claimed for blockage or other factors reported on lines 1a and 1c 2 Subtract line 2 from line 1d 3 300,993,906. Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions) 4,514,909. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4....... 5 296,478,997. Minimum investment return. Enter 5% of line 5........ 14,823,950. Part XI Distributable Amount (see instructions) (Section 4942(1)(3) and (i)(5) private operating foundations and certain foreign organizations check here ▶ □ and do not complete this part.) Minimum investment return from Part X, line 6..... 14,823,950. 2a Tax on investment income for 2014 from Part VI, line 5..... 2a b Income tax for 2014. (This does not include the tax from Part VI.)..... 2 c 180,962. Distributable amount before adjustments. Subtract line 2c from line 1...... 3 14,642,988. Recoveries of amounts treated as qualifying distributions..... 4 Add lines 3 and 4 5 14,642,988 Deduction from distributable amount (see instructions)..... 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1......... 642,988 Part XII | Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26...... 1 a 15,101,736. **b** Program-related investments – total from Part IX-B... 1 b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes 2 3 a **b** Cash distribution test (attach the required schedule)...... 3Ь Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4..... 4 15,101,736. 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) 5 180,962. 6 Adjusted qualifying distributions. Subtract line 5 from line 4 14,920,774. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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

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Part XIII Undistributed Income (see instructions)

Part XIII Undistributed income (see instruc				
	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				14,642,988.
2 Undistributed income, if any, as of the end of 2014:				
a Enter amount for 2013 only			0.	
b Total for prior years: 20 , 20, 20		0.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009				1
b From 2010				
c From 2011 276, 557.				
d From 2012 828,586.				
e From 2013	1 105 142			
f Total of lines 3a through e	1,105,143.			
4 Qualifying distributions for 2014 from Part XII, line 4: ► \$ 15,101,736.				
a Applied to 2013, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required – see instructions)		0.		
c Treated as distributions out of corpus (Election required – see instructions)	0.			14 642 000
d Applied to 2014 distributable amount				14,642,988.
e Remaining amount distributed out of corpus.	458,748.			0.
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			
6 Enter the net total of each column as indicated below:	1 562 901			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	1,563,891.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount — see instructions		0.		
e Undistributed income for 2013. Subtract line 4a from line 2a. Taxable amount — see instructions			0.	
f Undistributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)	0			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)	0	•		
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	1,563,891			
10 Analysis of line 9:				
a Excess from 2010				
b Excess from 2011 276,557.				
c Excess from 2012 828,586.			-	
d Excess from 2013				
e Excess from 2014 458,748.				Form 990-PF (2014)

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Form 990-PF (2014) UNIHEALTH FOUNDAT				95-500403	3 Page 10
Part XIV Private Operating Foundat					N/A
1 a If the foundation has received a ruling or determined is effective for 2014, enter the date of the received an article of the received and article of the received	ruling			<u></u>	i
b Check box to indicate whether the foundation		erating foundation of		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
investment return from Part X for each year listed	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					· •
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information	(Complete this	part only if the	foundation had	\$5,000 or more	in
assets at any time during the		istructions.)		···	
Information Regarding Foundation Manage a List any managers of the foundation who have close of any tax year (but only if they have NONE	contributed more ti	han 2% of the total c than \$5,000). (See	ontributions received section 507(d)(2).)	by the foundation bef	ore the
b List any managers of the foundation who own	10% or more of the	stock of a corporation	on (or an equally large	e portion of the owner	ship of
a partnership or other entity) of which the NONE	foundation has a 1	0% or greater inter	est.	, , , , , , , , , , , , , , , , , , , ,	omp of
2 Information Regarding Contribution, Gran	t, Gift, Loan, Scho	olarship, etc, Progr	ams:		
Check here if the foundation only mal requests for funds. If the foundation makes complete items 2a, b, c, and d.	kes contributions to	preselected charitab	le organizations and		
a The name, address, and telephone number or	e-mail address of t	he person to whom a	pplications should be	addressed:	
SEE STATEMENT 15					
b The form in which applications should be s	ubmitted and info	rmation and materia	als they should inclu	ıde:	
SEE STATEMENT FOR LINE 2A					
c Any submission deadlines:					
SEE STATEMENT FOR LINE 2A					
d Any restrictions or limitations on awards, s	uch as by geograp	ohical areas, charita	able fields, kinds of	institutions, or other	factors:
SEE STATEMENT FOR LINE 2A					
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				•	\

3 Grants and Contributions Paid During the Yo	ear or Approved for Fut	ure Paymen	t	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
a Paid during the year DETAILED LIST OF CONTRIBUTIONS ATTACHED,			SEE ATTACHED	13,954,036.
			► 3a	13,954,036.
b Approved for future payment				
Total			► 3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross	s amounts unless otherwise indicated.	Unrelated	business income	Excluded by	y section 512, 513, or 514	
-		(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (See instructions.)
_	am service revenue:			code		
a b			· ·			
Б		 		 		
ď				 		
				 		
f						· · · · · · · · · · · · · · · · · · ·
a Fees	and contracts from government agencies .					
_	bership dues and assessments			 		
	t on savings and temporary cash investments			14	1,045,988.	
4 Divide	ends and interest from securities			14	5,477,598.	
5 Net re	ental income or (loss) from real estate:					
a Debt-	financed property					
b Not d	ebt-financed property					
6 Net rer	ntal income or (loss) from personal property					
7 Other	investment income			14	982,514.	
8 Gain oi	r (loss) from sales of assets other than inventory			18	14,467,515.	
9 Net in	ncome or (loss) from special events					
10 Gross	s profit or (loss) from sales of inventory					
11 Other	revenue:			·		
a				_ _		
ь				_		
ć		<u> </u>				
d		<u></u>				
e	(2.4)	<u> </u>		-	07 000 615	
12 Subto	otal. Add columns (b), (d), and (e)	L			21,973,615.	01 072 615
	heet in line 12, columns (b), (d), and (e)			• • • • • • • • • • • • • • • • • • • •	13	21,973,615.
Part XVI	B Relationship of Activities to the	Accompils	nment of Exem	pt Purpos	es	
Line No. ▼	Explain below how each activity for which in accomplishment of the foundation's exempt	come is repor purposes (oth	ted in column (e) of er than by providing	Part XVI-A funds for su	contributed importantluch purposes). (See in	y to the estructions.)
N/A					·	
						
						· · · · · · · · · · · · · · · · · · ·
			· · · · · · · · · · · · · · · · · · ·		·	
					·	
						
					·····	
				· · · · · · · · · · · · · · · · · · ·		
						
						
						
						
						

For	m 990-PF (2014) UNIHEALTH FOUNDATION	95-5004033
Pa	Information Regarding Transfers To and Tran Exempt Organizations	sactions and Relationships With Noncharitable
1	Did the organization directly or indirectly engage in any of the fol described in section 501(c) of the Code (other than section 501(c)	llowing with any other organization

		.41 ! !! 14.			-46		Yes	No
1 D	rid the organization direction 5010	ctly or indirectly e	ingage in any of the follo ther than section 501(c)(wing with any 3) organization	other organization ns) or in section 527			
re	elating to political organ	zations?	and and section sortest	o) organization	13) 01 111 30011011 327,			
a T	ransfers from the report	ing foundation to	a noncharitable exempt	organization o	of:			
			· ·	-		1 a (1)		X
	Other assets					1 a (2)		X
	ther transactions:							
		anaharitahla aya	mnt organization			1 6 71		v
-	*		· •			1 b (1)	ļ	X
•	•		able exempt organization			1 b (2)		X
	•		r assets			1 b (3)		<u>X</u>
						1 b (4)		X
-	•					1 b (5)		X
(6	Performance of servi-	ces or membersh	ip or fundraising solicitat	ions		1 b (6)		X
c S	haring of facilities, equip	oment, mailing lis	sts, other assets, or paid	employees.		1 c		X
d lif	the answer to any of th	e above is 'Yes,'	complete the following s	chedule. Colui	mn (b) should always show the fair n received less than fair market value in	narket val	ue of	
เก ล	ne goods, other assets, or ny transaction or sharin	services given by arrangement, s	the reporting foundation. If how in column (d) the va	the foundation	ds, other assets, or services receive	d.		
(a) Line			of noncharitable exempt organiz		d) Description of transfers, transactions, and		ngement	te -
	(b) / intourie involved	(c) Harrie	or monoratrable exempt organize	-	ay bosomption or districted, transactions, and	onering critic	- gonioni	
N/A								
								
		_						
								
					··· <u>·</u>			
								
								
								
2 a ls	the foundation directly or	indirectly affiliated	d with, or related to, one or	more tax-exen	npt organizations	_		
d	escribed in section 501(c) of the Code (o	ther than section 501(c)(3)) or in section	on 527?	Yes	X	No
b If	'Yes,' complete the following	owing schedule.				_	_	
	(a) Name of organiz	ation	(b) Type of orga	nization	(c) Description of rela	tionship		
N/A								
					 			
			18) 11					
	Under penalties of perjury, I de correct, and complete. Declara	clare that I have exam tion of preparer (other	ined this return, including accom than taxpayer) is based on all in	formation of which	and statements, and to the best of my knowledg preparer has any knowledge.	e and beliet,	it is true	ž,
Sign						May the	RS disc	uss
Here	mary	Dall	13-	1-16	PRESIDENT	this retur preparer	n with th shown b	ne below
	Signature of officer or trustee		Date	1 14	Title	(see inst	ructions)) '
	Print/Type preparer's				Date Tools] X PTIN	Yes	No
	"		Preparer's sygnature	191	Gleck Lill			
Paid	MIKE MCCOR	MICK	Fl.		2/24/16 self-employed	P00182	<u> 2870</u>	
Prepa	rer Firm's name	ARMANINO I	LLP	<u> </u>	Firm's EIN ► 94-62	214841		
Use O		5959 TOPAN		SUITE 18				
			IILLS, CA 91367		Phone no. (818	587-	9300	J
BAA						Form 99		
							- • • •	,_~ · ~/

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, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of the organization		Employer identification number		
UNIHEALTH FOUNDATION		95-5004033		
Organization type (check one):				
Filers of:	Section:			
Form 990 or 990-EZ	501(c)() (enter number) organization			
	4947(a)(1) nonexempt charitable trust not treated as a	private foundation		
	527 political organization	•		
Form 990-PF	X 501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable trust treated as a priva	ate foundation		
		ate roundation		
	501(c)(3) taxable private foundation			
Check if your organization is covered by the Ge	eneral Rule or a Special Rule			
	anization can check boxes for both the General Rule and a S	inocial Pula. See instructions		
•	anization can check boxes for both the General Rule and a S	pecial Rule. See instructions.		
General Rule				
[X] For an organization filing Form 990, 990-E2 property) from any one contributor. Comple	r, or 990-PF that received, during the year, contributions tota te Parts I and II. See instructions for determining a contribu-	lling \$5,000 or more (in money or tor's total contributions.		
Special Rules				
	1(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% supp that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 1 ne year, total contributions of the greater of (1) \$5,000 or (2) 0-EZ, line 1. Complete Parts I and II.	16a, or 16b, and that		
during the year, total contributions of more	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received f than \$1,000 <i>exclusively</i> for religious, charitable, scientific, li children or animals. Complete Parts I, II, and III.	rom any one contributor, terary, or educational		
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				
Caution: An organization that is not covered by 990-PF), but it must answer 'No' on Part IV, In	the General Rule and/or the Special Rules does not file Scie 2, of its Form 990; or check the box on line H of its Form efiling requirements of Schedule B (Form 990, 990-EZ, or 9	hedule B (Form 990, 990-EZ, or 990-EZ or on its Form 990-PF,		

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

Schedule	В	(Form	990,	990-EZ,	or	990-PF)	(2014)

Page	

1 of

1 of Part 1

Name of organization
UNIHEALTH FOUNDATION

Employer identification number

95-5004033

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space	is needed.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	FACEY MEDICAL FOUNDATION 15451 SAN FERNANDO MISSION BLV MISSION HILLS, CA 91345	\$21,989.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)

of Part II

Employer identification number

UNIHEA	LTH FOUNDATION	95-5004	033
Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional sp	pace is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
		 \$	
(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
		<u> </u>	

BAA

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Schedule B	(Form	990.	990-EZ.	or 990	-PF)	(2014)	

Name of organization

Employer identification number

UNTHEAL	LTH FOUNDATION		95-5004033				
Part III	Exclusively religious, charitable, et	c., contributions to organization	s described in section 501(c)(7), (8)				
	or (10) that total more than \$1,000 for the						
	the following line entry. For organizations of						
	contributions of \$1,000 or less for the year.	(Enter this information once See instruc	tions.)				
	Use duplicate copies of Part III if additional	space is needed.	VIOLISI)				
			(4)				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I	r urpose or girt	ose of gift	Description of now gire is field				
	37 / 3						
	N/A						
	L						
		(e) Transfer of gift					
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee				
			<u> </u>				
	L						
		· <u>·</u> ····					
(a) No. from	(b)	(c) Use of gift	(d)				
No. from Part I	Purpose of gift	Use of gift	Description of how gift is held				
Parti							
	L						
		(e) Transfer of gift					
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee				
		(-)	//\				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I	i dipose oi giit	Use of gift	bescription of now gire is not				
	<u> </u>						
	L						
		(e) Transfer of gift					
			Bolotton stille addisseration of the set				
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee				
	<u> </u>						
(2)	(h)	(6)	(d)				
(a) No. from	(b) Purpose of gift	(c) Use of gift	Description of how gift is held				
Part I							

(e) Transfer of gift Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2014)

2014

FEDERAL STATEMENTS

PAGE 2

UNIHEALTH FOUNDATION

95-5004033

STATEMENT 4 (CONTINUED) FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
COHEN & STEERS INTL REALTY	\$ 44,733.	\$ 44,733.		
CRESENT HIGH INCOME CF	56,010.	56,010.		
EUROPACIFIC GROWTH FUND	80,277.	80,277.		
GOLDENTREE MASTER FUND LTD	62,148.	62,148.		
HS MANAGEMENT PARTNERS	230,680.	230,680.		
JP MORGAN	36,710.	36,710.		
KING STREET CAPITAL LTD	87,136.	87,136.		
LAZARD EMERGING MKTS FUND	96,246.	96,246.		
M. KINGDON OFFSHORE LTD	61,887.	61,887.		
MATTHEWS PACIFIC TIGER	91,117.	91,117.		
MET WEST TOTAL RETURN	99,428.	99,428.		
NEW MOUNTAIN PARTNERS IV	90,374.	90,374.		
OAK HILL CAPITAL PARTNERS VIII, LP OCM OPPORTUNITIES FUND VII, LP	43,441. 10,572.	43,441. 10,572.		
OCM OPPORTUNITIES FUND VII, LP	5,486.			
OCM PRINCIPAL OPPS FUND IV, LP	14,199.	5,486. 14,199.		
OHA EUROPEAN STRATEGIC CREDIT FUND		33,449.		
PAAMCO PACIFIC HEDGED STRATEGIES .	81,159.	81,159.		
PAYDEN EMERGING MARKETS BOND FUND.	50,161.	50,161.		
PIMCO COMMODITY REAL RETURN FUND.	25,561.	25,561.		
PIMCO TOTAL RETURN FUND	101,497.	101,497.		
RLH INVESTORS II, LP	113,434.	113,434.		
ROBECO	107,304.	107,304.		
RS GLOBAL NATURAL RESOURCES FUND .	37,274.	37,274.		
SIGULER GUFF BRIC OPPS FUND II	74,421.	74,421.		
SILVER LAKE PARTNERS IV	68,788.	68,788.		
TEMPLETON GLOBAL	44,945.	44,945.		
VAUGHAN NELSON SMALL CAP VALUE	135,873.	135,873.		
WAMCO CORE PLUS FUND	61,616.	61,616.		
WILLIAM BLAIR INT'L GROWTH FUND	147,957.	147,957.		
YORK CREDIT OPPS UNIT TRUST	59,972.	59,972.		-
TOTAL	\$ 3,086,496.	<u>\$3,086,496.</u>	\$ 0.	\$ 0.

STATEMENT 5 FORM 990-PF, PART I, LINE 18 TAXES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
CALIFORNIA REGISTRATION TAXES COUNTY BUSINESS TAX FEDERAL EXCISE TAX	\$ 235. 419. 128,571.	\$ 419.		\$ 235.
PAYROLL TAXES TOTAL	52,758. \$ 181,983.	21,103. \$ 21,522.	\$ 0.	31,655. \$ 31,890.

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STATEMENT 6 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
	\$ 19,200.			\$ 11,520.
BANK FEESBOARD MEETINGSBOND FEES	4,319. 12,300. 7,297.	4,319. 4,920. 7,297.		7,380.
CONSULTANTS	16,250.	750.		15,500.
COURIERDUES & SUBSCRIPTIONS	2,448. 6,008.	1,224.		1,224. 6,008.
EMPLOYEE BENEFITS	109,858.	43,943.		65,915.
EQUIPMENT RENTAL FOREIGN TAXES, PASS THROUGH ENTITIE	7,121.	3,561.		3,560.
·	22,659.	22,659.		40.005
INSURANCE MAINTENANCE, REPAIRS & UTILITIES	81,815. 17,709.	40,908. 8,754.		40,907. 8,955.
MISC SERVICE FEES	4,733.	2,367.		2,366.
PARKING VALIDATIONS POSTAGE	1,170. 806.	242.		1,170. 564.
PROFESSIONAL DEVELOPMENTRECORD STORAGE	3,225. 9,423.	1,275. 3,769.		1,950. 5,654.
SUPPLIES	13,101.	5,057.		8,044.
TELEPHONEWORKERS' COMP INSURANCE	12,161. 6,033.	4,864. 2,413.		7,297. 3,620.
	\$ 357,636.		\$ 0.	

STATEMENT 7 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS

CORPORATE STOCKS	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
BARROW HANLEY WILLIAM BLAIR INTL CAUSEWAY CAP INTL P A A M CO W A M C O VAUGHAN NELSON EUROPACIFIC GROWTH LAZARD EM PAYDEN EM INCOME HS MANAGEMENT EQUITY RS GLOBAL NATURAL RESOURCES FD PIMCO COMMODITY REAL RETURN FD MATTHEWS PACIFIC TIGER	MKT VAL	\$ 21,582,333. 11,949,488. 12,060,140. 7,901,574. 13,397,201. 11,612,593. 12,177,785. 7,123,402. 6,378,544. 22,851,074. 2,288,732. 2,931,152. 7,756,188.	\$ 21,582,333.
COHEN & STEERS INSTL REALTY	MKT VAL TOTAL	5,837,976. \$ 145848182.	5,837,976. \$ 145,848,182.

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STATEMENT 8 FORM 990-PF, PART II, LINE 10C INVESTMENTS - CORPORATE BONDS

CORPORATE BONDS	VALUATION METHOD	BOOK VALUE	FAIR MARKETVALUE
PIMCO TOTAL RETURN BRANDYWINE GLOBAL OPP FIXED INCOME	MKT VAL MKT VAL TOTAL	\$ 21,454,881. 8,370,133. \$ 29,825,014.	\$ 21,454,881. 8,370,133. \$ 29,825,014.

STATEMENT 9 FORM 990-PF, PART II, LINE 13 INVESTMENTS - OTHER

	VALUATION METHOD	BOOK VALUE	FAIR MARKETVALUE
OTHER INVESTMENTS	-		
OTHER INVESTMENTS OAK TREE FUND IV, LP OCM OPPORTUNITIES FUND VII, LP RLH INVESTORS II, LP JP MORGAN SLP III SIGULAR GUFF BRIC OPP FUND II LP OCM OPPORTUNITIES FUND VII(B) GOLDEN TREE OFFSHORE FUND KING STREET CAPITAL LTD ARTIS TECHNOLOGY YORK CREDIT OPPS UNIT TRUST M. KINGDON OFFSHORE LTD JP MORGAN TRANSFER ACCOUNT BLACKSTONE FUND OF FUNDS OHA EURO CREDIT FUND BLACKSTONE REAL ESTATE VII OAK HILL CAPITAL RLH INVESTORS III, LP CRESCENT CAPITAL INCOME FD ROBECO BOSTON PARTNERS MET WEST TOTAL RETURN TEMPLETON GLOBAL	MKT VAL	\$ 1,600,822. 303,498. 3,258,698. 3,782,630. 2,985,306. 234,210. 4,178,996. 5,719,330. 0. 3,862,592. 4,054,742. 455,884. 8,108,984. 2,015,994. 5,278,461. 2,448,314. 3,093,873. 6,841,427. 11,982,593. 21,675,355. 7,987,667.	\$ 1,600,822. 303,498. 3,258,698. 3,782,630. 2,985,306. 234,210. 4,178,996. 5,719,330. 0. 3,862,592. 4,054,742. 455,884. 8,108,984. 2,015,994. 5,278,461. 2,448,314. 3,093,873. 6,841,427. 11,982,593. 21,675,355. 7,987,667.
SILVER LAKE IV MERRILL LYNCH	MKT VAL MKT VAL	1,987,758. 0.	1,987,758. 0.
NEW MOUNTAIN PARTNERS	MKT VAL	1,590,145.	1,590,145.

STATEMENT 10 FORM 990-PF, PART II, LINE 14 LAND, BUILDINGS, AND EQUIPMENT

CATEGORY			BASIS	 ACCUM. DEPREC.	 BOOK VALUE	F	AIR MARKET VALUE
FURNITURE AND FIXTURES MACHINERY AND EQUIPMENT IMPROVEMENTS	TOTAL	\$ <u>s</u>	8,323. 10,519. 11,778. 30,620.	\$ 4,212. 10,471. 2,078.	\$ 4,111. 48. 9,700.	\$	4,111. 48. 9,700.

TOTAL \$ 103447279. \$103,447,279.

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STATEMENT 11 FORM 990-PF, PART II, LINE 15 OTHER ASSETS				
DEFERRED COMPENSATION DEPOSITS PREPAID INSURANCE		9 87		R MARKET VALUE 431,702. 9,165. 87,730. 528,597.
STATEMENT 12 FORM 990-PF, PART II, LINE 22 OTHER LIABILITIES EMPLOYEE SETTLEMENT				289,653.
DEFERRED COMPENSATION DEFERRED RENT & ACCRUED VACATIO				431,702. 178,280.
			TOTAL \$	899,635.
STATEMENT 13 FORM 990-PF, PART III, LINE 5 OTHER DECREASES PASS THROUGH ENTITY TIMING DIFF UNREALIZED LOSS ON INVESTMENTS.			<u> </u>	2,810,985. 18,421,985. 21,232,970.
STATEMENT 14 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUS	STEES, AND KEY EMPLOY	/EES		
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED		CONTRI- BUTION TO EBP & DC	
DAVID CARPENTER 800 WILSHIRE BLVD, SUITE 1300 LOS ANGELES, CA 90017	CHAIRMAN & CEO 20.00	\$ 150,000.	\$ 22,500.	\$ 9,600.
MARY ODELL 800 WILSHIRE BLVD, SUITE 1300 LOS ANGELES, CA 90017	PRESIDENT 40.00	253,200.	36,925.	9,600.
KATHLEEN SALAZAR 800 WILSHIRE BLVD, SUITE 1300 LOS ANGELES, CA 90017	CFO 40.00	212,692.	30,659.	0.

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STATEMENT 14 (CONTINUED) FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTEI	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	
DAVID S. CANNOM 800 WILSHIRE BLVD, SUITE 1300 LOS ANGELES, CA 90017	DIRECTOR 3.00	\$ 22,250.	\$ 0.	\$ 0.
BRADLEY CALL 800 WILSHIRE BLVD, SUITE 1300 LOS ANGELES, CA 90017	DIRECTOR 3.00	26,750.	0.	0.
PATRICK HADEN 800 WILSHIRE BLVD, SUITE 1300 LOS ANGELES, CA 90017	DIRECTOR 3.00	24,250.	0.	0.
ROBERT G. SPLAWN 800 WILSHIRE BLVD, SUITE 1300 LOS ANGELES, CA 90017	DIRECTOR 3.00	22,500.	0.	0.
LYDIA KENNARD 800 WILSHIRE BLVD, SUITE 1300 LOS ANGELES, CA 90017	DIRECTOR 3.00	24,250.	0.	0.
CHARLES REED 800 WILSHIRE BLVD, SUITE 1300 LOS ANGELES, CA 90017	DIRECTOR 3.00	28,750.	0.	0.
KEITH RENKEN 800 WILSHIRE BLVD, SUITE 1300 LOS ANGELES, CA 90017	DIRECTOR 3.00	24,750.	0.	0.
FRANK SANCHEZ 800 WILSHIRE BLVD, SUITE 1300 LOS ANGELES, CA 90017	DIRECTOR 3.00	21,250.	0.	0.
	TOTA	L <u>\$ 810,642.</u>	\$ 90,084.	\$ 19,200.

STATEMENT 15 FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:

NAME:

UNIHEALTH FOUNDATION

CARE OF:

MARY ODELL

STREET ADDRESS:

800 WILSHIRE BLVD., SUITE 1300

CITY, STATE, ZIP CODE:

LOS ANGELES, CA 90017

TELEPHONE:

213 630-6500

E-MAIL ADDRESS:

FORM AND CONTENT:

GRANT APPLICATION OUTLINE PROVIDED UPON SUBMISSION OF

SUBMISSION DEADLINES: RESTRICTIONS ON AWARDS: LETTER OF INQUIRY
DETERMINED ON AN ANNUAL BASIS
AWARDS RESTRICTED GEOGRAPHICALLY