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

**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](http://www.irs.gov/form990pf).**

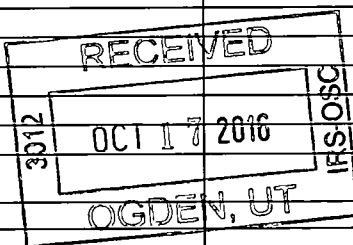
**Open to Public Inspection**

**For calendar year 2014, or tax year beginning** Dec 1, 2014, **and ending** Nov 30, 2015

Name of foundation <b>THE ART LABOE FOUNDATION, INC.</b>		<b>A</b> Employer identification number 95-3619250
Number and street (or P O box number if mail is not delivered to street address) <b>1805 E DESERT PARK AVE</b>		<b>B</b> Telephone number (see instructions) (760) 699-2294
City or town, state or province, country, and ZIP or foreign postal code <b>PALM SPRINGS CA 92262</b>		<b>C</b> If exemption application is pending, check here . ▶ <input type="checkbox"/>
<b>G</b> Check all that apply		<b>D</b> 1 Foreign organizations, check here . . . . . ▶ <input type="checkbox"/>
<input type="checkbox"/> Initial return	<input type="checkbox"/> Initial return of a former public charity	2 Foreign organizations meeting the 85% test, check here and attach computation . . . . . ▶ <input type="checkbox"/>
<input type="checkbox"/> Final return	<input type="checkbox"/> Amended return	<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here . . . . . ▶ <input type="checkbox"/>
<input type="checkbox"/> Address change	<input type="checkbox"/> Name change	<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here . . . . . ▶ <input type="checkbox"/>
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation		
<input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		
<b>I</b> Fair market value of all assets at end of year (from Part II, column (c), line 16) ▶ \$ 1,732,056.		<b>J</b> Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Part I Analysis of Revenue and Expenses</b> (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))				
<b>1</b> Contributions, gifts, grants, etc., received (attach schedule) . . . . .	10,595.			
<b>2</b> Ck ▶ <input checked="" type="checkbox"/> If the foundn is not required to attach Sch B				
<b>3</b> Interest on savings and temporary cash investments . . . . .	182.	182.		
<b>4</b> Dividends and interest from securities . . . . .	45,112.	45,112.		
<b>5a</b> Gross rents . . . . .				
<b>b</b> Net rental income or (loss) . . . . .				
<b>6a</b> Net gain or (loss) from sale of assets not on line 10 . . . . .				
<b>b</b> Gross sales price for all assets on line 6a . . . . .				
<b>7</b> Capital gain net income (from Part IV, line 2) . . . . .				
<b>8</b> Net short-term capital gain . . . . .				
<b>9</b> Income modifications . . . . .				
<b>10a</b> Gross sales less returns and allowances . . . . .				
<b>b</b> Less Cost of goods sold . . . . .				
<b>c</b> Gross profit or (loss) (attach schedule) . . . . .				
<b>11</b> Other income (attach schedule) . . . . .				
<b>12 Total</b> Add lines 1 through 11. . . . .	55,889.	45,294.		
<b>13</b> Compensation of officers, directors, trustees, etc. . . . .				
<b>14</b> Other employee salaries and wages . . . . .				
<b>15</b> Pension plans, employee benefits . . . . .				
<b>16a</b> Legal fees (attach schedule) . . . . .				
<b>b</b> Accounting fees (attach sch) . . . . .				
<b>c</b> Other prof fees (attach sch) . . . . .				
<b>17</b> Interest . . . . .				
<b>18</b> Taxes (attach schedule)(see instrs) TAX AND LICENCES. . . . .	0.			
<b>19</b> Depreciation (attach sch) and depletion . . . . .				
<b>20</b> Occupancy . . . . .				
<b>21</b> Travel, conferences, and meetings . . . . .				
<b>22</b> Printing and publications . . . . .				
<b>23</b> Other expenses (attach schedule) See Line 23 Stmt	23,675.			
<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23 . . . . .	23,675.			
<b>25</b> Contributions, gifts, grants paid . . . . .	78,500.			78,500.
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25 . . . . .	102,175.			78,500.
<b>27 Subtract</b> line 26 from line 12.				
<b>a Excess of revenue over expenses and disbursements</b> . . . . .	-46,286.			
<b>b Net Investment Income</b> (if negative, enter -0-). . . . .		45,294.		
<b>c Adjusted net income</b> (if negative, enter -0-). . . . .				

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			
		Beginning of year	End of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value	
ASSETS	1	Cash — non-interest-bearing . . . . .	13,172.	79,313.	79,313.
	2	Savings and temporary cash investments . . . . .	1,769,659.	1,652,743.	1,652,743.
	3	Accounts receivable . . . . . ▶			
		Less: allowance for doubtful accounts . . . . . ▶			
	4	Pledges receivable . . . . . ▶			
		Less: allowance for doubtful accounts . . . . . ▶			
	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) . . . . .			
		c Investments — corporate bonds (attach schedule) . . . . .			
	11	Investments — land, buildings, and equipment basis . . . . . ▶			
	Less: accumulated depreciation (attach schedule) . . . . . ▶				
12	Investments — mortgage loans . . . . .				
13	Investments — other (attach schedule) . . . . .				
14	Land, buildings, and equipment: basis . . . . . ▶				
	Less: accumulated depreciation (attach schedule) . . . . . ▶				
15	Other assets (describe ▶ L-15 Stmt ) . . . . .	2,449.	0.	0.	
16	<b>Total assets</b> (to be completed by all filers — see the instructions. Also, see page 1, item I) . . . . .	1,785,280.	1,732,056.	1,732,056.	
LIABILITIES	17	Accounts payable and accrued expenses . . . . .			
	18	Grants payable . . . . .			
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, & other disqualified persons . . . . .			
	21	Mortgages and other notes payable (attach schedule) . . . . .			
	22	Other liabilities (describe ▶ ) . . . . .			
	23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .			
NET ASSETS OR FUND BALANCES	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. . . . . ▶				
	24	Unrestricted . . . . .			
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. . . . . ▶ X				
	27	Capital stock, trust principal, or current funds . . . . .			
	28	Paid-in or capital surplus, or land, bldg, and equipment fund . . . . .			
	29	Retained earnings, accumulated income, endowment, or other funds . . . . .	1,785,280.	1,732,056.	
30	<b>Total net assets or fund balances</b> (see instructions) . . . . .	1,785,280.	1,732,056.		
31	<b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	1,785,280.	1,732,056.		

**Part 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 end-of-year figure reported on prior year's return) . . . . .	1	1,785,280.
2	Enter amount from Part I, line 27a . . . . .	2	-46,286.
3	Other increases not included in line 2 (itemize) . . . . . ▶ UNREALIZED GAIN/LOSS ON INVESTMENTS	3	10,068.
4	Add lines 1, 2, and 3 . . . . .	4	1,749,062.
5	Decreases not included in line 2 (itemize) . . . . . ▶ See Other Decreases Stmt	5	17,006.
6	Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30 . . . . .	6	1,732,056.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company)		(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a				
b				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))	
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any		
a				
b				
c				
d				
e				
2 Capital gain net income or (net capital loss) . . . . .	<input type="checkbox"/> If gain, also enter in Part I, line 7 <input type="checkbox"/> If (loss), enter -0- in Part I, line 7		2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)	If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8		3	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? . . . . .  Yes  No  
 If 'Yes,' the foundation does not qualify under section 4940(e) Do not complete this part

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2013	66,549.	1,780,100.	0.037385
2012	51,450.	1,162,579.	0.044255
2011	34,384.	562,309.	0.061148
2010	37,600.	598,311.	0.062844
2009	43,070.	639,908.	0.067307
2 Total of line 1, column (d) . . . . .			2 0.272939
3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years . . . . .			3 0.054588
4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5. . . . .			4 1,717,584.
5 Multiply line 4 by line 3 . . . . .			5 93,759.
6 Enter 1% of net investment income (1% of Part I, line 27b) . . . . .			6 453.
7 Add lines 5 and 6. . . . .			7 94,212.
8 Enter qualifying distributions from Part XII, line 4 . . . . .			8 78,500.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

Table with 11 rows for excise tax calculations. Includes items like 'Exempt operating foundations', 'Domestic foundations that meet the section 4940(e) requirements', 'Tax under section 511', 'Credits/Payments', and 'Total credits and payments'. Values include 906, 0, 592, 314, and 0.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions like 'During the tax year, did the foundation attempt to influence any national, state, or local legislation?', 'Did it spend more than \$100 during the year for political purposes?', and 'Has the foundation engaged in any activities that have not previously been reported to the IRS?'. Includes 'Yes' and 'No' columns with 'X' marks.

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**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

**5 a** During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  Yes  No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?  Yes  No

(3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions)  Yes  No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  Yes  No

**b** If any answer is 'Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  Yes  No

Organizations relying on a current notice regarding disaster assistance check here

**c** If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  Yes  No

If 'Yes,' attach the statement required by Regulations section 53.4945-5(d).

**6 a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

If 'Yes' to 6b, file Form 8870

**7 a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes  No

**b** If 'Yes,' did the foundation receive any proceeds or have any net income attributable to the transaction?  Yes  No

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(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
ARTHUR EGONIAN 1805 E DESERT PARK AVE PALM SPRINGS CA 92262	PRESIDENT 4.00	0.	0.	0.
RICHARD E GILBERT, ESQ 3414 SEPUELVEDA BLVD., SUITE 1200 LOS ANGELES CA 90035	DIRECTOR 2.00	0.	0.	0.
DALE BERGER 1805 E DESERT PARK AVE PALM SPRINGS CA 92262	VP, TREAS. & SEC. DIRECTOR 4.00	0.	0.	0.
DOROTHY J JAHNS 10626 VALLEY SPRING LANE TOLUCA LAKE CA 91602	DIRECTOR 2.00	0.	0.	0.

**2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE.'**

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000  None

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**

**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
NONE ----- -----		
----- -----		
----- -----		
----- -----		
----- -----		
Total number of others receiving over \$50,000 for professional services . . . . . ▶		None

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A ----- -----	0.
2 ----- -----	
3 ----- -----	
4 ----- -----	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount	
1 NONE ----- -----	0.	
2 ----- -----		
All other program-related investments See instructions 3 ----- -----		
Total. Add lines 1 through 3 . . . . . ▶		None

**Part X** Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b> Fair-market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes		
<b>a</b> Average monthly fair market value of securities . . . . .	<b>1 a</b>	1,659,772.
<b>b</b> Average of monthly cash balances . . . . .	<b>1 b</b>	83,968.
<b>c</b> Fair market value of all other assets (see instructions) . . . . .	<b>1 c</b>	
<b>d</b> Total (add lines 1a, b, and c) . . . . .	<b>1 d</b>	1,743,740.
<b>e</b> Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) . . . . .	<b>1 e</b>	
<b>2</b> Acquisition indebtedness applicable to line 1 assets . . . . .	<b>2</b>	
<b>3</b> Subtract line 2 from line 1d . . . . .	<b>3</b>	1,743,740.
<b>4</b> Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions) . . . . .	<b>4</b>	26,156.
<b>5</b> Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 . . . . .	<b>5</b>	1,717,584.
<b>6</b> Minimum investment return. Enter 5% of line 5 . . . . .	<b>6</b>	85,879.

**Part XI** 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.)

<b>1</b> Minimum investment return from Part X, line 6 . . . . .	<b>1</b>	85,879.
<b>2 a</b> Tax on investment income for 2014 from Part VI, line 5 . . . . .	<b>2 a</b>	906.
<b>b</b> Income tax for 2014 (This does not include the tax from Part VI) . . . . .	<b>2 b</b>	
<b>c</b> Add lines 2a and 2b . . . . .	<b>2 c</b>	906.
<b>3</b> Distributable amount before adjustments Subtract line 2c from line 1 . . . . .	<b>3</b>	84,973.
<b>4</b> Recoveries of amounts treated as qualifying distributions . . . . .	<b>4</b>	
<b>5</b> Add lines 3 and 4 . . . . .	<b>5</b>	84,973.
<b>6</b> Deduction from distributable amount (see instructions) . . . . .	<b>6</b>	
<b>7</b> Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 . . . . .	<b>7</b>	84,973.

**Part XII** Qualifying Distributions (see instructions)

<b>1</b> Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes:		
<b>a</b> Expenses, contributions, gifts, etc — total from Part I, column (d), line 26 . . . . .	<b>1 a</b>	78,500.
<b>b</b> Program-related investments — total from Part IX-B. . . . .	<b>1 b</b>	0.
<b>2</b> Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes . . . . .	<b>2</b>	
<b>3</b> Amounts set aside for specific charitable projects that satisfy the		
<b>a</b> Suitability test (prior IRS approval required) . . . . .	<b>3 a</b>	
<b>b</b> Cash distribution test (attach the required schedule) . . . . .	<b>3 b</b>	
<b>4</b> Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 . . . . .	<b>4</b>	78,500.
<b>5</b> 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) . . . . .	<b>5</b>	0.
<b>6</b> Adjusted qualifying distributions. Subtract line 5 from line 4 . . . . .	<b>6</b>	78,500.

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7 . . . . .				84,973.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only . . . . .			88,414.	
b Total for prior years 20 __, 20 __, 20 __				
3 Excess distributions carryover, if any, to 2014				
a From 2009 . . . . .				
b From 2010 . . . . .	4,682.			
c From 2011 . . . . .	6,293.			
d From 2012 . . . . .	0.			
e From 2013 . . . . .				
f Total of lines 3a through e . . . . .	10,975.			
4 Qualifying distributions for 2014 from Part XII, line 4: \$ 78,500.				
a Applied to 2013, but not more than line 2a . . . . .				
b Applied to undistributed income of prior years (Election required — see instructions) . . . . .				
c Treated as distributions out of corpus (Election required — see instructions) . . . . .				
d Applied to 2014 distributable amount . . . . .				78,500.
e Remaining amount distributed out of corpus . . . . .	0.			
5 Excess distributions carryover applied to 2014 . . . . . (If an amount appears in column (d), the same amount must be shown in column (a) )	6,473.			6,473.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5. . . . .	4,502.			
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 . . . . .				
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. . . . .			88,414.	
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) . . . . .				
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 . . . . .	4,502.			
10 Analysis of line 9				
a Excess from 2010 . . . . .	0.			
b Excess from 2011 . . . . .	4,502.			
c Excess from 2012 . . . . .	0.			
d Excess from 2013 . . . . .	0.			
e Excess from 2014 . . . . .	0.			

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

N/A

**1 a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling. . . . .

**b** Check box to indicate whether the foundation is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

	Pnor 3 years				(e) Total
	(a) 2014	(b) 2013	(c) 2012	(d) 2011	
<b>2 a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> 'Assets' alternative test — enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i) . . . . .					
<b>b</b> 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed . . . . .					
<b>c</b> 'Support' alternative test — enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) . . . . .					
<b>(3)</b> Largest amount of support from an exempt organization . . . . .					
<b>(4)</b> 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 year — see instructions.)**

**1 Information Regarding Foundation Managers:**  
**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2) )  
 NONE

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest  
 NONE

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs:**  
 Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

**a** The name, address, and telephone number or e-mail address of the person to whom applications should be addressed  
 N/A

**b** The form in which applications should be submitted and information and materials they should include  
 N/A

**c** Any submission deadlines:  
 N/A

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors  
 N/A

**Part XV Supplementary Information (continued)**

**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a Paid during the year</b>				
ABRAHAM LINCOLN HIGH SCHOOL 3501 N BROADWAY LOS ANGELES CA 90031	NONE	501 (C) (3)	EDUCATIONAL SCHOLARSHIPS	1,000.
ACTORS AND OTHERS FOR ANIMALS 11523 BURBANK BLVD NORTH HOLLYWOOD CA 91601	NONE	501 (C) (3)	ANIMALS & WILDLIFE	500.
ADOPTION INFORMATION CENTER 1327 POST AVE STE K TORRANCE CA 90501	NONE	501 (C) (3)	YOUTH SERVICES	2,000.
AMERICAN CANCER SOCIETY PO BOX 79099 LOS ANGELES CA 90079	NONE	501 (C) (3)	HEALTH/MEDICAL	500.
ARTHRITIS FOUNDATION PO BOX 96280 WASHINGTON DC 20090	NONE	501 (C) (3)	HEALTH/MEDICAL	500.
ASPCA PO BOX 96929 WASHINGTON DC 20077	NONE	501 (C) (3)	ANIMALS & WILDLIFE	1,000.
BEST FRIENDS ANIMAL SOCIETY 5001 ANGEL CANYON RD KANAB UT 84741	NONE	501 (C) (3)	ANIMALS & WILDLIFE	2,000.
<del>AIDS PROJECT LOS ANGELES</del> <del>PO BOX 74547</del> <del>LOS ANGELES CA 90004</del>	<del>NONE</del>	<del>501 (C) (3)</del>	<del>HEALTH/MEDICAL</del>	
CHARLIE KEYAN ARMENIAN COMMUNITY SCHOOL 108 N VILLA AVE CLOVIS CA 93612	NONE	501 (C) (3)	YOUTH SERVICES	500.
See Line 3a statement				69,500.
<b>Total</b> . . . . . ▶ <b>3 a</b>				78,500.
<b>b Approved for future payment</b>				
<b>Total</b> . . . . . ▶ <b>3 b</b>				





Form 990-PF, Page 1, Part I, Line 23

Line 23 Stmt

Other expenses	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
OFFICER'S LIFE INSURANCE PREMIUM	10,595.			
DUES AND SUBSCRIPTIONS	430.			
PUBLIC RELATIONS & DEVELOPMENT	2,500.			
ACCOUNTING SERVICES	850.			
INVESTMENT FEES	9,295.			
BANK FEES	5.			
<b>Total</b>	<u>23,675.</u>			

Form 990-PF, Page 2, Part III, Line 5

Other Decreases Stmt

DECREASE CSV OFFICER LIFE INSURANCE	2,449.
UNREALIZED GAIN/LOSS ON INVESTMENTS	13,489.
LATE FILING PENALTIES AND INTEREST	0.
FEDERAL INVESTMENT INCOME TAX	1,068.
<b>Total</b>	<u>17,006.</u>

Form 990-PF, Page 11, Part XV, line 3a

Line 3a statement

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox
				Amount
<b>a Paid during the year</b>				
COALITION TO SALUTE AMERICA'S HEROES PO BOX 96440 WASHINGTON DC 20090	NONE	501(C) (3)	MILITARY/VETERANS	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 500.
DISABLED AMERICAN VETERANS PO BOX 14301 CINCINNATI OH 45250	NONE	501(C) (3)	MILITARY/VETERANS	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 500.
ALLEY CAT ALLIES PO BOX 98179 WASHINGTON DC 20077	NONE	501(C) (3)	ANIMALS & WILDLIFE	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 1,000.
EASTER SEALS PO BOX 67567 LOS ANGELES CA 90067	NONE	501(C) (3)	HEALTH/MEDICAL	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 500.
ENTERPRISE HIGH SCHOOL 15405 SUNSET AVE KERMAN AVE CA 93630	NONE	501(C) (3)	EDUCATION SCHOLARSHIPS	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 1,000.
FARM SANCTUARY PO BOX 58 BUFFALO NY 14205	NONE	501(C) (3)	ANIMALS & WILDLIFE	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 500.

Form 990-PF, Page 11, Part XV, line 3a

Continued

Line 3a statement

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Person or Business Checkbox	Amount
Name and address (home or business)					
<b>a Paid during the year</b> FRESNO HIGH SCHOOL 1839 N ECHO AVE FRESNO CA 93704	NONE	501(C)(3)	EDUCATIONAL SCHOLARSHIPS	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/>	1,000.
FRIENDS OF CATS, INC PO BOX 1613 LAKESIDE CA 92040	NONE	501(C)(3)	ANIMALS & WILDLIFE	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/>	2,000.
THE FUND FOR ANIMALS PO BOX 52182 PHOENIX AZ 85072	NONE	501(C)(3)	ANIMALS & WILDLIFE	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/>	500.
HEROBOX INC PO BOX 17458 WASHINGTON DC 20041	NONE	501(C)(3)	MILITARY/VETERAN	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/>	1,000.
HOLLYWOOD ARTS COUNCIL 6671 SUNSET BLVD STE 1502 HOLLYWOOD CA 90028	NONE	501(E)(3)	ARTS/MEDIA COMMUNITY	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/>	1,000.
HOLLYWOOD HIGH SCHOOL 1521 N HIGHLAND AVE LOS ANGELES CA 90028	NONE	501(C)(3)	EDUCATION SCHOLARSHIP	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/>	1,000.
HOMEBOY INDUSTRIES 130 W BRUNO ST LOS ANGELES CA 90012	NONE	501(C)(3)	YOUTH SERVICES	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/>	3,000.
THE HUMANE SOCIETY OF THE UNITED STATES 700 PROFESSIONAL DR GAITHERSBURG MD 20879	NONE	501(C)(3)	ANIMALS & WILDLIFE	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/>	1,000.
JAMES A GARFIELD HIGH SCHOOL 5101 E SIXTH ST LOS ANGELES CA 90022	NONE	501(C)(3)	EDUCATION SCHOLARSHIPS	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/>	1,000.
KCET PO BOX 469028 ESCONDIDO CA 92046	NONE	501(C)(3)	ARTS/MEDIA COMMUNITY	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/>	2,000.
KEEPERS OF THE WILD PO BOX 9169 PUEBLO CO 81008	NONE	501(C)(3)	ANIMALS & WILDLIFE	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/>	500.
KERMAN HIGH SCHOOL 205 S 1ST STREET KERMAN CA 93630	NONE	501(C)(3)	EDUCATION SCHOLARSHIPS	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/>	1,000.
LA REGIONAL FOOD BANK PO BOX 60500 LOS ANGELES CA 90060	NONE	501(C)(3)	POVERTY RELIEF	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/>	1,000.
LAST CHANCE FOR ANIMALS 8033 W SUNSET BLVD PMB 835 LOS ANGELES CA 90046	NONE	501(C)(3)	ANIMALS & WILDLIFE	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/>	5,000.
LOS ANGELES MISSION 303 EAST 5TH STREET LOS ANGELES CA 90013	NONE	501(C)(3)	POVERTY RELIEF	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/>	1,000.

Form 990-PF, Page 11, Part XV, line 3a  
Line 3a statement

Continued

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox
				Amount
<b>a Paid during the year</b> ALLEY CAT RESCUE PO BOX 96499 WASHINGTON DC 20077	NONE	501(C)(3)	ANIMALS & WILDLIFE	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 1,000.
MUSEUM OF BROADCAST COMMUNICATIONS 360 N STATE ST CHICAGO IL 60654	NONE	501(C)(3)	ARTS/MEDIA COMMUNITY	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 2,000.
ALZHEIMER'S ASSOCIATION PO BOX 96011 WASHINGTON DC 20090	NONE	501(C)(3)	HEALTH/MEDICAL	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 500.
NATIONAL HISPANIC MEDIA COALITION 55 S GRAND AVENUE PASADENA CA 91105	NONE	501(C)(3)	ARTS/MEDIA COMMUNITY	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 3,500.
NATIONAL MS SOCIETY PO BOX 4527 NEW YORK NY 10163	NONE	501(C)(3)	HEALTH/MEDICAL	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 1,000.
NATIONAL RIGHT TO WORK FOUNDATION 8001 BRADDOCK ROAD SPRINGFIELD VA 22160	NONE	501(C)(3)	HUMAN/CIVIL LIBERTIES	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 500.
PALM SPRINGS WALK OF STARS PO BOX 1156 PALM SPRINGS CA 92263	NONE	501(C)(3)	ARTS/MEDIA COMMUNITY	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 1,000.
PARALYZED VETERANS OF AMERICA 801 EIGHTEENTH ST NW WASHINGTON DC 20077	NONE	501(C)(3)	MILITARY/VETERAN	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 1,000.
THE SALVATION ARMY PO BOX 866014 LOS ANGELES CA 90086	NONE	501(C)(3)	POVERTY RELIEF	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 1,000.
SCLERODERMA RESEARCH FOUNDATION 220 MONTGOMERY ST STE 1411 SAN FRANCISCO CA 94104	NONE	501(C)(3)	HEALTH/MEDICAL	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 2,000.
ST JUDE CHILDREN'S HOSPITAL PO BOX 50 MEMPHIS TN 38101	NONE	501(C)(3)	HEALTH/MEDICAL	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 1,000.
SUNNYSIDE HIGH SCHOOL 1019 S PEACH AVE FRESNO CA 93727	NONE	501(C)(3)	EDUCATION SCHOLARSHIPS	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 1,000.
THEODORE ROOSEVELT HIGH SCHOOL 456 SOUTH MATTHEWS ST LOS ANGELES CA 90033	NONE	501(C)(3)	EDUCATION SCHOLARSHIPS	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 1,000.
TIGER HAVEN PO BOX 50550 KNOXVILLE TN 37950	NONE	501(C)(3)	ANIMALS & WILDLIFE	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 500.
THE ARARAT HOME OF LOS ANGELES, INC 15105 MISSION HILLS RD MISSION HILLS CA 91345	NONE	501(C)(3)	CULTURE/HERITAGE	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 500.

Form 990-PF, Page 11, Part XV, line 3a  
**Line 3a statement**

Continued

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Person or Business Checkbox	Amount
Name and address (home or business)				Person or Business	
<b>a Paid during the year</b> CEDARS-SINAI MEDICAL CENTER 1821 W OLYMPIC BLVD PASADENA CA 91199	NONE	501(C)3	HEALTH/MEDICAL	Person or Business <input checked="" type="checkbox"/>	500.
CITY OF HOPE 1055 WILSHIRE BLVD 11TH FLOOR ANGELES CA 90017	NONE	501(C)3	HEALTH/MEDICAL	Person or Business <input checked="" type="checkbox"/>	500.
WOODROW WILSON HIGH SCHOOL 4500 MULTNOMAH ST LOS ANGELES CA 90032-5	NONE	501(C)3	EDUCATION SCHOLARSHIPS	Person or Business <input checked="" type="checkbox"/>	1,000.
WORLD WILDLIFE FUND PO BOX 96555 WASHINGTON DC 20090	NONE	501(C)3	ANIMALS & WILDLIFE	Person or Business <input checked="" type="checkbox"/>	500.
WOUNDED WARRIOR PROJECT PO BOX 758541 TOPEKA KS 66675	NONE	501(C)3	MILITARY/VETERAN	Person or Business <input checked="" type="checkbox"/>	1,000.
YOUNG AMERICA'S FOUNDATION PO BOX 2518 SANTA BARBARA CA 93120	NONE	501(C)3	YOUTH SERVICES	Person or Business <input checked="" type="checkbox"/>	500.
COPS PO BOX 96272 WASHINGTON DC 20090	NONE	501(C)3	PUBLIC SAFETY	Person or Business <input checked="" type="checkbox"/>	1,000.
COVENANT HOUSE PO BOX 85099 LOS ANGELES CA 90072	NONE	501(C)3	YOUTH SERVICES	Person or Business <input checked="" type="checkbox"/>	500.
DEFENDERS OF WILDLIFE PO BOX 1553 MERRIFIELD VA 22116	NONE	501(C)3	ANIMALS & WILDLIFE	Person or Business <input checked="" type="checkbox"/>	500.
EISENHOWER MEDICAL CTR FOUNDATION 39000 BOB HOPE DRIVE RANCHO MIRAGE CA 92270	NONE	501(C)3	HEALTH/MEDICAL	Person or Business <input checked="" type="checkbox"/>	1,000.
GREENPEACE FUND PO BOX 90136 FREDERICKSBURG VA 22404	NONE	501(C)3	ANIMALS & WILDLIFE	Person or Business <input checked="" type="checkbox"/>	1,000.
THE HERITAGE FOUNDATION PO BOX 97057 WASHINGTON DC 20077	NONE	501(C)	CULTURE/HERITAGE	Person or Business <input checked="" type="checkbox"/>	1,000.
HOLLYWOOD CHAMBER COMMUNITY FOUNDATION 7018 HOLLYWOOD BLVD HOLLYWOOD CA 90028	NONE	501(C)3	ARTS/MEDIA COMMUNITY	Person or Business <input checked="" type="checkbox"/>	500.
THE DEFENSE OF ANIMALS 3010 KERNER BLVD SAN RAFAEL CA 94901	NONE	501(C)3	ANIMALS & WILDLIFE	Person or Business <input checked="" type="checkbox"/>	1,000.
JUDICIAL WATCH PO BOX 96234 WASHINGTON DC 20077	NONE	501(C)3	HUMAN/CIVIL LIBERTIES	Person or Business <input checked="" type="checkbox"/>	3,000.

Form 990-PF, Page 11, Part XV, line 3a  
Line 3a statement

Continued

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox
				Amount
<b>a Paid during the year</b>				
THE LOS ANGELES FREE CLINIC 8405 BEVERLY BLVD LOS ANGELES CA 90048	NONE	501(C)3	HEALTH/MEDICAL	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 500.
LAW ENFORCEMENT LEGAL DEFENSE FUND 45005 AVIATION DR., PO BOX 16129 WASHINGTON DC 20041	NONE	501(C)3	HUMAN/CIVIL LIBERTIES	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 1,000.
THE LEUKEMIA & LYMPHOMA SOCIETY 1311 MAMARONECK AVE WHITE PLAINS NY 10605	NONE	501(C)3	HEALTH/MEDICAL	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 500.
MARINE TOYS FOR TOTS FOUNDATION PO BOX 4002896 DES MOINES IA 50340	NONE	501(C)3	YOUTH SERVICES	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 1,000.
MEXICAN AMERICAN OPPORTUNITY FOUNDATION 401 N GARFIELD AVE MONTEBELLO CA 90640	NONE	501(C)3	CULTURE/HERITAGE	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 1,500.
MAYO CLINIC PO BOX 450 ALBERT LEA MN 56007	NONE	501(C)3	HEALTH/MEDICAL	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 1,000.
MEDIA RESEARCH CENTER PO BOX 97040 WASHINGTON DC 20090	NONE	501(C)3	ARTS/MEDIA COMMUNITY	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 500.
PAWS/LA 1150 S HOPE ST SUITE A LOS ANGELES CA 90015	NONE	501(C)3	ANIMALS/WILDLIFE	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 1,000.
PEACEFUL VALLEY DONKEY RESCUE PO BOX 802980 SANTA CLARITA CA 91380	NONE	501(C)3	ANIMALS/WILDLIFE	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 500.
ROCK AND ROLL HALL OF FAME AND MUSEUM, INC. 1100 ROCK AND ROLL BLVD CLEVELAND OH 44114	NONE	501(C)3	ARTS/MEDIA COMMUNITY	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 1,000.
SECOND AMENDMENT FOUNDATION 12500 NE 10TH PLACE BELLVUE WA 98005	NONE	501(C)3	HUMAN/CIVIL LIBERTIES	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 500.
SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS 5026 W JEFFERSON BLVD LOS ANGELES CA 90016	NONE	501(C)3	ANIMALS & WILDLIFE	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 500.
UNION RESCUE MISSION PO BOX 53629 LOS ANGELES CA 90053	NONE	501(C)3	POVERTY/RELIEF	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 1,000.
THE USO PO BOX 96880 WASHINGTON DC 20077	NONE	501(C)3	MILITARY/VETERANS	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 500.
WILDLIFE WAYSTATION 14831 LITTLE TUJUNGA CANYON RD ANGELES NATIONAL FOREST CA 91342	NONE	501(C)3	ANIMALS & WILDLIFE	Person or Business <input type="checkbox"/> <input checked="" type="checkbox"/> 1,000.

Form 990-PF, Page 11, Part XV, line 3a  
**Line.3a statement**

Continued

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foun- dation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox
				Amount
<b>a Paid during the year</b> AMERICAN BORDER PATROL PO BOX 97346 WASHINGTON DC 20090	NONE	501(C)3	PUBLIC SAFETY	Person or Business <input checked="" type="checkbox"/> 500.

Total

69,500.

Form 990-PF, Page 2, Part II, Line 15  
**Other Assets Stmt**

Line 15 - Other Assets:	Beginning Year Book Value	End of Year	
		Book Value	Fair Market Value
CASH SURRENDER VALUE - OFFICERS LIFE INSURANCE	2,449.	0.	0.
Total	<u>2,449.</u>	<u>0.</u>	<u>0.</u>