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DLN: 93491320043676

2014

OMB No 1545-0052

Open to Public Inspection

Department of the Treasury Internal Revenue

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

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its instructions is at $\underline{www.irs.gov/form990pf}$.

Serv	ıce.							
For	cale	endar year 2014, or tax year beginning	12-0	01-2014	, a	nd ending 1	1-30-2015	
		undation				A Employer Id	entification numb	er
		leming Foundation I M Link CPA				95-3950678		
Num	ber and	d street (or P O box number if mail is not delivered to street	address) Room/suite		B Telephone nu	ımber (see ınstructio	ns)
		nta Monica Blvd				(310) 286-6830)	
City	or town	n, state or province, country, and ZIP or foreign postal code				C If exemption	application is pendir	a check here
		, CA 90025				C I GXGINPUGN	application to perior	, s, sinesk here
<u> </u>		III that apply Figure Figu	rn of a	former nublic about		-		
G C	песк а	ill that apply Initial return Initial return Amended		former public charit	У	D 1. Foreign o	rganızatıons, check h	ere •
		Address change Name cha				2. Foreign o	rganizations meeting	the 85%
							k here and attach co undation status was	
		ype of organization			nn.		n 507(b)(1)(A), che	
		ket value of all assets at end J Accounting me		✓ Cash		F If the found	ation is in a 60-mont	h termination
of '	year (1	from Part II, col (c), Other (spe	cify) _				n 507(b)(1)(B), che	
lin	e 16) ►	\$ 404 (Part I, column (c	l) must	be on cash basis)				
Pa	rt I	Analysis of Revenue and Expenses total of amounts in columns (b), (c), and (d) may not necessally equal the amounts in column (a) (see instructions)	(The	(a) Revenue and expenses per books	(b)	Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attac	h					
		schedule)		32,550				
	2	Check ► ☐ If the foundation is not required to						
		attach						
		Sch B	· · ·					
	3	Dividends and interest from securities	lents					
	•							
	5a	Gross rents	· ·					
<u>e</u>	b	Net rental income or (loss)						
e II	6a	Net gain or (loss) from sale of assets not on line	10					
Revenue	b	Gross sales price for all assets on line 6a						
_	7	Capital gain net income (from Part IV, line 2) .						
	8	Net short-term capital gain	[
	9	Income modifications						
	10a	Gross sales less returns and allowances						
	b	Less Cost of goods sold						
	C	Gross profit or (loss) (attach schedule)						
	11 12	Other income (attach schedule)		32,550		0		
	13	Compensation of officers, directors, trustees, etc		32,330				
	14	Other employee salaries and wages						
Sé	15	Pension plans, employee benefits						
nse	16a	Legal fees (attach schedule)						
Expenses	ь	Accounting fees (attach schedule)	[% 3,050				
	С	Other professional fees (attach schedule)						
ţ	17	Interest		on.1				
stra	18	Taxes (attach schedule) (see instructions) .	F	35				
Administrative	19	Depreciation (attach schedule) and depletion . Occupancy						
Ē	20	Travel, conferences, and meetings						
дÞ	22	Printing and publications						
and	23	Other expenses (attach schedule)						
bu	24	Total operating and administrative expenses.						
grat		Add lines 13 through 23		3,085		0		0
Operating	25	Contributions, gifts, grants paid	ļ	29,208				29,208
_	26		and					
		25	anu	32,293		0		29,208
	27	Subtract line 26 from line 12	.					
	a	Excess of revenue over expenses and disburseme Net investment income (If negative, enter -0-)	ents	257		0		
	b c	Adjusted net income (if negative, enter -0-)	. }			J		
								<u> </u>

D.	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year		fyear
-	1 1 11		(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	147	404	404
	2	Savings and temporary cash investments			
	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 schedule)			
		Less allowance for doubtful accounts >			
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U S and state government obligations (attach schedule)			
	ь	Investments—corporate stock (attach schedule)			
	С	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)			
	16	Total assets (to be completed by all filers—see the	147	404	404
	4-7	Instructions Also, see page 1, item I)	147	404	404
	17	Accounts payable and accrued expenses			
Ş	18	Grants payable			
豆	19	Deferred revenue			
Liabilities	20 21	Mortgages and other notes payable (attach schedule)			
ニ	22	Other liabilities (describe ►			
	23	Total liabilities (add lines 17 through 22)		0	
	23	Foundations that follow SFAS 117, check here			
6 S		and complete lines 24 through 26 and lines 30 and 31.			
ınc	24	Unrestricted			
Sale	25	Temporarily restricted			
Б П	26	Permanently restricted			
Fund Balances		Foundations that do not follow SFAS 117, check here			
or F		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	147	404	
Net	30	Total net assets or fund balances (see instructions)	147	404	
~	31	Total liabilities and net assets/fund balances (see instructions)	147	404	
Pa	rt II	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 ad	ree	
_		with end-of-year figure reported on prior year's return)		1 1	147
2		Enter amount from Part I, line 27a			257
3		Other increases not included in line 2 (itemize) ▶		3	
4		Add lines 1, 2, and 3		4	404
5		Decreases not included in line 2 (itemize) ▶		5	
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pa		ne 30 . 6	404

		the kınd(s) of property sold (e g , re louse, or common stock, 200 shs M	•	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a						
(e	e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis pense of sale		 n or (loss) f) minus (g)
a		(**************************************			(=) [.,
b						
С						
d						
e						
	mplete only for assets	showing gain in column (h) and owne	d by the foundation	n on 12/31/69	(I) Gains (Co	I (h) gain minus
	F M V as of 12/31/69	(i) Adjusted basis	(k) Exc	cess of col (i)	col (k), but not	t (n) gan initides t less than -0-) or from col (h))
а						
b						
С						
d						
е						
2	Capital gain net inco	me or (net capital loss)	If gain, also enter If (loss), enter -0-		. 2	
3	Net short-term capit	al gain or (loss) as defined in sectio	ns 1222(5) and (6	,)	-	
J	If gain, also enter in	Part I, line 8, column (c) (see instru			} 3	
Part	V Qualification	Under Section 4940(e) for R	educed Tax on	Net Investme	ent Income	
For opt	tional use by domestic	private foundations subject to the se	ection 4940(a) tax	on net investment	:income)	
fsecti	on 4940(d)(2) applies,	leave this part blank				
		e section 4942 tax on the distributa ot qualify under section 4940(e) Do			eriod?	┌ Yes 🔽 No
1 En	ter the appropriate amo	ount in each column for each year, se	ee instructions befo	ore making any ent	tries	
	(a) period years Calendar	(b) Adjusted qualifying distributions	(c) Net value of nonchar		(d Distribution	on ratio
year (or tax year beginning in) 2013				(col (b) divide	
	2013	75,890 35,825		7,293 8,349		10 40587 4 29093
	2012	49,836		4,155		11 99422
	2010	76,926		556		138 35612
	2009	45,395		10,496		4 32498
2	Total of line 1, colum	nn (d)			2	169 37212
3		ratio for the 5-year base period—div the foundation has been in existence			3	33 87442
4	Enter the net value o	f noncharitable-use assets for 2014	from Part X, line 5	5 [4	11,239
5	Multiply line 4 by line	e 3			5	380,715
6	Enter 1% of net inve	stment income (1% of Part I, line 2	7b)		6	
7	Add lines 5 and 6				7	380,715
8		ibutions from Part XII, line 4		[8	29,208
	If line 8 is equal to o	r greater than line 7, check the box i	ın Part VI, lıne 1b,	and complete that	part using a 1% ta	

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)?

. Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names

If "Yes," complete Part XIV

and addresses

No

9

10

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?

No

No

3b

42

4b

Form	1990-PF (2014)								F	Page 6
Pa	rt VIII-B Statements Rega	rding Activities for	r Wh	ich Form 4720	May	Be Required (cont	inue	i)		
5a	During the year did the foundation	n pay or incur any amour	it to							
	(1) Carry on propaganda, or other	rwise attempt to influenc	e leg	ıslatıon (section 49	45(e)) [?]	√ No			
	(2) Influence the outcome of any	specific public election	(see	section 4955), or to	car	ry				
	on, directly or indirectly, any	voter registration drive?				· · · · F Yes	▽			
	(3) Provide a grant to an individu			• •		☐ Yes ☐	No			
	(4) Provide a grant to an organiza				scrib	ped				
	in section 4945(d)(4)(A)? (se	ee instructions)				· · · · · · TYes	▽			1
	(5) Provide for any purpose other	than religious, charitabl	e,sc	ientific, literary, or						
	educational purposes, or for t	he prevention of cruelty	to ch	ıldren or anımals?.		· · · · · · □ Yes No	▽			
b	If any answer is "Yes" to 5a(1)-(5), did any of the transa	ction	s fail to qualify unde	r the	exceptions described in				
	Regulations section 53 4945 or instructions)?	n a current notice regard	ding d	disaster assistance	(see			5b	<u> </u>	No
	Organizations relying on a curren	t notice regarding disast	ter as	ssistance check here	e	.	_			
c	If the answer is "Yes" to question	n 5a(4), does the foundat	tion c	laım exemption from	the					
	tax because it maintained expend	diture responsibility for t	he gr	ant?		· · · · F Yes	▽			
	If "Yes," attach the statement requ	ired by Regulations section	n 53	4945-5(d)						
6 a	Did the foundation, during the yea			` '	prer	niums on				
	a personal benefit contract?				٠.	· · · · TYes	- No			
b	Did the foundation, during the yea				nal l	• •	/ NO	6b	l I	No
b	If "Yes" to 6b, file Form 8870	ir, pay premiums, unecci	yori	nullectiy, on a perso)IIaI I	benefit contract	•	ОВ	-	110
72	At any time during the tax year, w	was the foundation a part	v to :	nrohibited tay shal	tor t	ransaction? — —				
	- · · · · · · · · · · · · · · · · · · ·	·		•		1 .65 [4] 	
	If yes, did the foundation receive Information About					n Managers, Highly		7b Emp	loye	No es,
	and Contractors									
1	List all officers, directors, trustees	'	т —	· · · · · · · · · · · · · · · · · · ·	see i	•				
	(a) Name and address	(b) Title, and average hours per week		c) Compensation If not paid, enter	ے ا	(d) Contributions to mployee benefit plans	(e) E	xpen	se acc	ount,
	(a) Name and address	devoted to position	'	-0-)		deferred compensation	oth	ner all	lowand	es
Rhon	da Fleming	President		0						
103	40 Santa Monica Blvd	20 00								
	Angeles,CA 90025									
2	Compensation of five highest-paid	l employees (other than	thos	e included on line 1-	-see		iter "N	IONE.		
(a)	Name and address of each employ paid more than \$50,000	yee (b) Title, and aver hours per week devoted to positi	<	(c) Compensation	n	(d) Contributions to employee benefit plans and deferred compensation			se acc Iowand	count,
NON	IE									

(a) Name and address of each person paid more than \$50,000	(b) ⊤ype of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional service		<u> </u>
Total number of others receiving over \$50,000 for professional service		
Part IV A Summary of Direct Charitable Activities		
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include organizations and other beneficiaries served, conferences convened, research papers p	relevant statistical information such as the number of produced, etc.	Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investment	s (see instructions)	
Describe the two largest program-related investments made by the foundation dur	· · · · · · · · · · · · · · · · · · ·	A mount
1		
		1
		1
2		
		1
-		1
All other program-related investments See instructions		
3		
		1
		†
Total. Add lines 1 through 3		•

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

29,208

Fori	m 990-PF (2014)				Page 9
P	art XIII Undistributed Income (see instru	ctions)			
		(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1	Distributable amount for 2014 from Part XI, line 7				562
2	Undistributed income, if any, as of the end of 2014				
а	Enter amount for 2013 only				
b	Total for prior years 20				
	Excess distributions carryover, if any, to 2014				
а	From 2009				
Ь					
	From 2012				
	Total of lines 3a through e	15,685			
	Qualifying distributions for 2014 from Part	,			
7	XII, line 4 ► \$ 29,208				
а	Applied to 2013, but not more than line 2a				
	Applied to undistributed income of prior years				
	(Election required—see instructions)				
c	Treated as distributions out of corpus (Election	0			
	required—see				
	tructions)				562
	Remaining amount distributed out of corpus	28,646			-
	Excess distributions carryover applied to 2014				
,	(If an amount appears in column (d), the				
	same amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:				
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	44,331			
b	Prior years' undistributed income Subtract				
_	Inne 4b from line 2b				
	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				
	Undistributed income for 2013 Subtract line				
-	4a from line 2a Taxable amount—see				
	instructions				
f	Undistributed income for 2014 Subtract				
	lines 4d and 5 from line 1 This amount must be distributed in 2015				
7	Amounts treated as distributions out of				
•	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election may	29,208			
_	be required - see instructions)	23,200			
8	Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)				
٥	Excess distributions carryover to 2015.				
3	Subtract lines 7 and 8 from line 6a	15,123			
10	Analysis of line 9				
а	Excess from 2010				
b	Excess from 2011				
c	Excess from 2012				
d					
e	Excess from 2014 15,123				

For	m 990-PF (2014)					Page 1
ŀ	Part XIV Private Operating Four	ndations (see in	structions and Pa	art VII-A, questi	on 9)	
1a ▶	If the foundation has received a ruling or d foundation, and the ruling is effective for 2					
b	Check box to indicate whether the organiz	ation is a private or	erating foundation	described in section	on	or
	Enter the lesser of the adjusted net	Tax year		Prior 3 years	()/(3/	
	income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
	Investment return from Part X for each year listed	(4) 2011	(2) 2010	(3) 2312	(4)2011	
ь	85% of line 2a					
c	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	A mounts included in line 2c not used directly for active conduct of exempt					
	activities					
е	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					
а						
	(1) Value of all assets(2) Value of assets qualifying					
	under section 4942(1)(3)(B)(I)					
b	"Endowment" alternative test— enter 2/3					
	of minimum investment return shown in					
_	Part X, line 6 for each year listed "Support" alternative test—enter					
Ĭ	(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					
Рa	rt XV Supplementary Information	n (Complete th	is part only if	the organizati	on had \$5,000	or more in
	assets at any time during			organizati	on naa 45,000	oror o
1	Information Regarding Foundation Manage					
а	List any managers of the foundation who have before the close of any tax year (but only i					idation
		,	,	, ((-/(-//	
b	List any managers of the foundation who of ownership of a partnership or other entity)				lly large portion of t	he
	ownership of a parenership of other energy	of which the lounds	1011 1143 4 10 70 01	greater interest		
2	Information Regarding Contribution, Grant	t, Gift, Loan, Schola	rship, etc., Prograr	ns:		
	Check here ► ☐ If the foundation only ma					
	unsolicited requests for funds If the found other conditions, complete items 2a, b, c,		grants, etc (see ins	structions) to indiv	iduals or organizati	ons under
a	The name, address, and telephone numbe	r or e-mail address	of the person to wh	nom applications st	nould be addressed	
<u> </u>	Rhonda Fleming	Tor e man address	or the person to W	iom applications si	Todia be addressed	
	10340 Santa Monica Blvd					
	Los Angeles, CA 90025					
	(310) 286-6830 email@rhondafleming com					
	The form in which applications should be s	submitted and inforr	nation and materia	ls they should incl	ude	
_	Correspondence requesting contribution i			·		
С	Any submission deadlines	- '				
_	None					
	Any restrictions or limitations on awards	cuch as by googran	hinal areas about	abla fialda kinda a	f.matitutiana ar ath	

factors None

Part XV Supplementary Inform 3 Grants and Contributions Paid		roved for F	uture Payment	
Recipient	If recipient is an individual,	Foundation		
Kecipient	show any relationship to	status of	Purpose of grant or	A mount
Name and address (home or business)	or substantial contributor	recipient	contribution	
a Paid during the year See Additional Data Table	any foundation manager or substantial contributor		contribution	Amount
Total	<u> </u>		▶ 3a	29,208
b Approved for future payment				
Total				
				Form 990-PF (2014)

Ēn¹	ter gross	amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
1	Program	service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	function income (See instructions)
	а						
	b						
		<u> </u>					
2	g Fees a	and contracts from government agencies ship dues and assessments.					
	Interes	t on savings and temporary cash nents					
	Net rent	ds and interest from securities tal income or (loss) from real estate					
		financed property					
	Net ren	ebt-financed property					
7	Otherin	nvestment income					
8		(loss) from sales of assets other than					
		ome or (loss) from special events					
		rofit or (loss) from sales of inventory					
		evenue a					
	е						
		I Add columns (b), (d), and (e)					
L3		dd line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify c			1	3	
2		-B Relationship of Activities to		lishment of E	xempt Purpos		
	ine No. ▼	Explain below how each activity for which the accomplishment of the foundation's instructions.)	ch income is rep	orted in column (e) of Part XVI-A co	ntributed importa	

Part XVII	Information Re Noncharitable				actions a	nd Rel	ationships \	With			
section 5	rganızatıon dırectly or ıı 01(c) of the Code (othe	ndırectly enga	ige in any of	the following witl						Yes	No
organizat		. 4			.						
	from the reporting four								1a(1)		No
` '	rassets								1a(1)		No
b Other tra									10(2)		-110
	s of assets to a noncha	•	-						1b(1)		No
	hases of assets from a			nızatıon					1b(2)		No
	al of facilities, equipme		sets						1b(3)		No
(4) Reim	bursement arrangemen	nts							1b(4)		No
(5) Loan	s or loan guarantees.								1b(5)		No
(6) Perfo	rmance of services or n	nembership or	fundraising s	solicitations					1b(6)		No
c Sharing o	f facilities , equipment , i	mailing lists,	other assets,	or paid employe	es				1c		No
of the god	wer to any of the above ods, other assets, or se nsaction or sharing arr	rvices given b	y the reporti	ng foundation I1	the foundat	tion rece	ived less than	faır marke	et value		
(a) Line No	(b) Amount involved	(c) Name of n	onchantable exe	empt organization	(d) Descr	nption of tr	ansfers, transactio	ns, and sha	rıng arraı	ngemen	ıts
described √ No	indation directly or indii d in section 501(c) of th	ne Code (othe	•	•					. _ Y	es	
b If "Yes,"	complete the following : (a) Name of organization		1 74) Type of organizat	ıon I		(a) December	on of minter	anchin		
	(a) Name of organization	•	(6	, Type of organizat	10/1		(c) Descripti	ion or relation	- Janub		
the Info	ler penalties of perjury, best of my knowledge a rmation of which prepar	ind belief, it is	true, correct								
Sign Here \	*****			2016-11-15	***	****		return	IRS discu		7
	Signature of officer or t	rustee		Date	Tıtl	е		below	preparer		
l	Print/Type preparer's Andrea M Link CPA	name Pro	eparer's Sıgn	ature	Date	I .	neck if self- nployed ▶ ┌─	PTIN P(001111	26	
Paid Preparer	Firm's name ► Laurand Management	Co Inc				Fı	rm's EIN ▶				
Use											
Only	Firm's address ► 10340 Santa Monica 90025	Boulevard Lo	os Angeles, C	CA		Ph	none no (310)	286-683	0		

If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
or substantial contributor	гестріені		
NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	12,250
NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	1,700
NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	1,500
NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	1,500
NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	900
NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	500
NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	500
NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	500
NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	500
NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	300
NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	300
NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	300
NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	300
NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	300
NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	288
	show any relationship to any foundation manager or substantial contributor NONE NONE	show any relationship to any foundation manager or substantial contributor status of recipient NONE 501(C)(3) NONE 501(C)(3)	show any relationship to any foundation manager or substantial contributor NONE 501(C)(3) TO ADVANCE RECIPIENTS CHARITABLE PURPOSE NONE 501(C)(3) TO ADVANCE RECIPIENTS CHARITABLE PURPOSE

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	A mount	
a Paid during the year					
Childrens Burn Foundation 5000 VAN NUYS BLVD SHERMAN OAKS,CA 91403	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	250	
Jensine Bard Ministries PO BOX 1333 PALM DESERT,CA 92261	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	250	
Joni Friends PO BOX 6088 ALBERT LEA,MN 56007	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	250	
Samantha Landy Ministries PO BOX 373 PANGUITCH,UT 84759	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	250	
Smile Train 41 MADISON AVE 78TH FLOOR NEW YORK, NY 10010	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	250	
State Policy Network 1655 N FORT MYER DRIVE STE 360 ARLINGTON,VA 22209	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	250	
TBN PO BOX A SANTA ANA,CA 92711	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	250	
The Founding Assoc of the JDFAF 11620 WILSHIRE BLVD LOS ANGELES,CA 90025	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	250	
Guideposts Foundation 39 OLD RIDGEBURY ROAD STE 2AB DNABUTY,CT 06810	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	250	
The League for Children 1910 MAGNOLIA AVE LOS ANGELES,CA 90007	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	200	
World War II Veterans Committee 1100 N GLEBE ROAD STE 910 ARLINGTON,VA 22201	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	200	
Wycliffe Bible Translations PO BOX 628200 ORLANDO,FL 32862	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	200	
Diabetes Research Wellness Foundati 1832 CONNECTICUT AVE NW STE 420 WASHINGTON,DC 20009	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	150	
Union Rescue Mission 545 S SAN PEDRO LOS ANGELES,CA 90013	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	125	
Pride Rock Wildlife Refuge 17194 CO ROAD 329 TERRELL,TX 75161	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	108	

orm 990PF Part XV Line 3 - Gra	nts and Contributions F	Paid During tl	he Year or Approved for Fu	iture 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	A mount
a Paid during the year	of substantial contributor			
America's Prayer Network PO BOX 69 PORT ROYAL, VA 22535	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	100
Born Free USA PO BOX 32160 WASHINGTON,DC 20007	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	100
Child Share 1544 W GLENOAKDS BLV D GLENDALE, CA 91201	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	100
Congressional Prayer Caucus Foundat PO BOX 15095 CHESAPEAKE,VA 23328	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	100
Disabled American Veterans 3725 ALEXANDRIA PIKE COLD SPRING,KY 41076	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	100
Guiding Eyes for the Blind 611 GRANITE SPRING ROAD YORKTOWN HEIGHTS,NY 10598	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	100
Hero Box 237 SENOIA ROAD PEACHTREE CITY,GA 30269	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	100
Insight for Living Minstries PO BOX 5000 FRISCO,TX 75034	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	100
John Douglas French Alzheimers Fnd 11620 WILSHIRE BLVD STE 270 LOS ANGELES,CA 90025	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	100
Junior Blind of America 5300 ANGELES VISTA BLVD LOS ANGELES,CA 90043	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	100
Life Animal Rescue PO BOX 1431 AGOURA HILLS,CA 91376	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	100
Life Outreach International PO BOX 98200 FORT WORTH,TX 76182	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	100
Mary and Joseph League 5300 CREST ROAD RANCHO PALOS VERDES, CA 90275	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	100
Music That Ministers PO BOX 580 CORDOVA,TN 38088	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	100
Pet Adoption Fund 7507 DEERING CANOGA PARK,CA 91303	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	100
Total				29,208

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
Prayer In Jesus' Name Ministries PO BOX 77077 COLORADO SPRINGS,CO 80970	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	100
Special Olympics 1600 FORBES WAY 200 LONG BEACH,CA 90810	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	100
The Jeffrey Foundation 5470 W WASHINGTON BLVD LOS ANGELES,CA 90016	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	100
The Palms Springs Walk of Fame PO BOX 1156 PALM SPRINGS,CA 92263	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	100
The Sunshine Fund - OPCC 1751 CLOVERFIELD BLVD SANTA MONICA,CA 90404	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	100
Trinity Broadcast Network PO BOX A SANTA ANA,CA 92711	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	100
US Fund for Unicef 125 MAIDEN LANE NEW YORK,NY 10038	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	100
US Justice Foundation PO BOX 131637 HOUSTON,TX 77219	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	100
UNICO 271 US HIGHTWAY STE 103 FAIRFIELD,NJ 07004	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	100
Unity 1901 NW BLUE PARKWAY UNITY VILLAGE,MO 64065	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	100
WCIL 12901 VENICE BLVD LOS ANGELES,CA 90066	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	100
ROAR - Rescue Operation 45 SOUTH STREET RIDGEFIELD,CT 06877	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	9(
Running Strong for American Indian 8301 RICHMOND HWY STE 200 ALEXANDRIA,VA 22309	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	91
Paralyzed Veterans of America 801 EIGHTEENT STREET WASHINGTON,DC 20006	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	82
Disabled Veterans Natl Foundation 1020 19TH STREET STE 475 WASHINGTON, DC 20036	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	7.

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paıd durıng the year				Ī
Doctors Without Borders 333 7TH AVE NEW YORK,NY 10001	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	75
Freedom's Foundation PO BOX 67 VALLEY FORGE,PA 19481	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	75
Derusalem Prayer Team PO BOX 30000 PHOENIX,AZ 85046	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	75
Kenneth Copeland Ministries 14355 MORRIS DIDO RD NEWARK,TX 76071	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	75
Salesian Missions 2 LEFEVRE LANE NEW ROCHELLE,NY 10801	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	75
The Wilderness Society 1615 M STREET NW WASHINGTON,DC 20036	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	75
USO PO BOX 96860 WASHINGTON,DC 20077	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	75
The Ronald Reagan Presidential Foun 40 PRESIDENTIAL DR SIMI VALLEY,CA 93065	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	65
American Diabetes Assoc 2451 CRYSTAL DR STE 900 ARLINGTON,VA 22202	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	50
American Lung Association 55 W WACKER DR STE 1150 CHICAGO,IL 60601	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	50
Best Friends Animal Society 5001 ANGEL CANYON ROAD KANAB,UT 84741	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	50
Disabled Police Officers of America 222 GOVERNMENT AVE C NICEVILLE,FL 32578	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	50
Fisher House 111 ROCKVILLE PIKE STE 420 ROCKVILLE,MD 20850	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	50
Food for the Hungry 1001 CONNECTICUT AVE NW STE 115 WASHINGTON,DC 20036	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	50
Harvest Ministries PO BOX 4000 RIVERSIDE,CA 92514	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	50

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager recipie or substantial contributor			
a Paid during the year				
Intl Fellowship of Christians Jews 30 N LA SALLE ST STE 4300 CHICAGO,IL 60602	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	50
Liberty Institute 2001 WEST PLANO PARKWAY STE 1600 PLANO,TX 75075	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	50
Md Anderson Cancer Center 1515 HOLCOMBE BL HOUSTON,TX 77030	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	50
Memorial Sloan Kettering Cancer Ctr 1275 YORK AVE NEW YORK,NY 10065	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	50
Mothers Against Drunk Drivers 511 E JOHN CARPENTER FRWY STE 700 IRVING,TX 75062	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	50
PBS So Cal PO BOX 33816 LOS ANGELES,CA 90033	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	50
Tiger Creek Wildlife Refuge 17552 FM14 TYLER,TX 75706	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	50
American Bible Society 101 NORTH INDEPENDENCE MALL E FL 8 PHILADELPHIA,PA 19106	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	30
American Indian Relief Council 2401 EGLIN ST RAPID CITY,SD 57703	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	30
Missionary Oblates 9480 N DEL MASENOD DR BELLEVILLE,IL 62223	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	25
PLUS PO BOX 5815 HARLAN,IA 51593	NONE	501(C)(3)	TO ADVANCE RECIPIENTS CHARITABLE PURPOSE	25
Total			3a	29,208

efile GRAPHIC print - D	O NOT PROCESS	As	Filed Data -		DLN: 93491320043676			
TY 2014 Accounting Fees Schedule								
Name: Rhonda Fleming Foundation								
		co Andrea M Link CPA						
	EIN:	95-3950678						
	Software ID:	14000265						
Soft	ware Version:	2014	ŀv6.0					
Category	Amount		Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			

0

3,050

Accounting

efile GRAPHIC print - DO NOT P	ROCESS	As File	ed Data -			DLN: 93491320043676			
TY 2014 Taxes Schedule									
			Fleming Fo						
	EIN:	95-3950	678						
Softw	are ID:	1400026	55						
Software V	ersion:	2014v6.	0						
Category	nount	Net Inve		Adjusted Net Income	Disbursements for Charitable Purposes				
CA Registration Renewal		25							
Filing Fee		10							

efile GRAPHIC print -	DO NOT PROCESS	As Filed Data -			DLN: 93491320043676				
Schedule B		Schedu	le of Contributors		OMB No 1545-0047				
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	or 990-PF) ► Attach to Form 990, 990-EZ, or 990-PF Department of the Treasury ► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at								
Name of the organizati Rhonda Fleming Founda				Employer ide	entification number				
co Andrea M Link CPA	1000			95-395067	'8				
Organization type (check one)									
Filers of:	Section:								
Form 990 or 990-EZ	┌ 501(c)()(enter number) orga	nızatıon						
		nonexempt charital	ole trust not treated as a private found	dation					
	┌ 527 politica	organization							
Form 990-PF	□ 501(c)(3) e	xempt private found	dation						
		4947(a)(1) nonexempt charitable trust treated as a private foundation							
	┌ 501(c)(3) ta	axable private found	dation						
	=		t received, during the year, contribution and II See instructions for determinin	-					
Special Rules									
under sections treceived from a	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ /3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II								
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, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III									
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 the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)									

Name of organization

Employer identification number

	Fleming Foundation ea M Link CPA	95-	3950678
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed	•	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Rhonda Fleming 10281 Century Woods Drive Los Angeles, CA 90067	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_2	Blythe Brenden -Mann Foundation 401 East Eighth Street St 319 Sioux Falls, SD 57103	\$12,500	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	Brenden Mann Foundation 4321 W Flamingo Rd Las Vegas, NV 89103	\$12,500	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

lame of Rhonda	f organization Fleming Foundation		_	oyer identification number
o Andr Part II	ea M Link CPA Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed		95-3	950678
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>	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (see instructions)	•)	(d) Date received
			<u>\$</u>	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (see instructions))	(d) Date received
			<u>s</u>	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (see instructions))	(d) Date received
			<u>s</u>	

Schedule I	B (Form 990, 990-EZ, or 990-PF) (2014)			Page 4
	organization			Employer identification number
	eming Foundation • M Link CPA			95-3950678
Part III	that total more than \$1,000 for the ye	ear from any one II, enter the total of e instructions)	contributor. Complet	cribed in section 501(c)(7), (8), or (10) the columns (a) through (e) and the following line charitable, etc., contributions of \$1,000 or less for \$
(a) No.	coo duplicate copies of fart in it additions			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-				
	Transferee's name, address,		Transfer of gift Relatio	onship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		.		
	Transferee's name, address,		Transfer of gift Relation	onship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		<u> </u>		
	Transferee's name, address,		Transfer of gift Relation	onship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		·		
	Transferee's name, address,		Transfer of gift Relation	onship of transferor to transferee