

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



# Form 990-PF Department of the Treasury

### **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.

To provide the security numbers on this form as it www.irs.gov/form.

OMB No 1545-0052

		Revenue Service   Information about P		730-21	and its separa					moiniaavpi.	ported done his pection
_		llendar year 2015 or tax year beginning				, 20	15,	and end	ing	A Familian 14	, 20
		of foundation								A Employer Ident	
_		ENCHIO FOUNDATION					- 1			45-06078	<del></del>
1	Numb	er and street (or P O box number if mail is not deliv	ered to	street	address)			Room/suit	е	·	ber (see instructions)
										(3	10) 556-7600
_		9 AVENUE OF THE STARS						3050			
(	City or	town, state or province, country, and ZIP or foreign	posta	code						0.11	_
									- 1	C If exemption appli pending, check he	cation is
		ANGELES, CA 90067									
G	Che	eck all that apply Initial return			Initial return		er p	ublic cha	rity	D 1 Foreign organiz	ations, check here ▶
		Final return		L	Amended re	turn			ŀ	2 Foreign organiz	ations meeting the
_		Address chang			Name chang						
H	_Che	eck type of organization X Section 5	01(င္)	(3) e	xempt private	foundation	1		- 1	E If private foundati	on status was terminated
T		Section 4947(a)(1) nonexempt charitable trus			ther taxable pr		ndati	ion			b)(1)(A), check here
l	Fair	market value of all assets at JA	cour	iting i	method 🔀 C	ash 💹 A	Accı	rual	1	F If the foundation	s in a 60-month termination
	end	of year (from Part II, col (c), line	Oth	er (sp	ecify)					under section 507(	b)(1)(B), check here .
_				umn (d	d) must be on ca	sh basis )					
G	art	Analysis of Revenue and Expenses (	The	(a) F	Revenue and	(b) Net i	Inve	stment	1-	:) Adjusted net	(d) Disbursements for charitable
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in			penses per	1 ''	com		(0	income	purposes
<del></del> ,		column (a) (see instructions) )			books	ļ					(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)			1,753,783.	<del> </del>					
	2	Check ► if the foundation is not required to attach Sch				ļ					
-	3	Interest on savings and temporary cash investment				ļ			·		
	4	Dividends and interest from securities	· L			ļ					
	5a	Gross rents									
	ь	Net rental income or (loss)					=				ļ
e		Net gain or (loss) from sale of assets not on line 10	) <u> </u>		DECEN	7 7 7 7 7					
Revenue	b	b Gross sales pince for all assets on line 6a		<u> </u>	115000		읾				
6	7	Capital gain net income (from Part IV, line 2)	· . L	(2)	<u> лоо 4 1 </u>	2016				·	
4	8	Net short-term capital gain	·  _	8	APR II	T P	ග				<del> </del>
	9	Income modifications	·  _	1			贤				
	iva	Gross sales less returns and allowances	_4_	1	OGDEN				ļ		<del> </del>
		Less Cost of goods sold .									<del> </del>
ļ	С	Gross profit or (loss) (attach schedule)				<del> </del>					ļ
ļ	11	Other income (attach schedule)			752 502	<del> </del>					-
$\dashv$	12	Total. Add lines 1 through 11			1,753,783.	<del> </del>					<del> </del>
	13	Compensation of officers, directors, trustees, etc			0.	-					<del> </del>
nses	14	Other employee salaries and wages			<del></del>	<del> </del>					<del>                                     </del>
ě	15	Pension plans, employee benefits			2,103.	<del> </del>					2 102
Expe		Legal fees (attach schedule) ATCH 1				<del> </del>				<del></del>	2,103
او	b	Accounting fees (attach schedule)ATCH 2			1,500.	ļ				·	1,500
and Administrative	C	Other professional fees (attach schedule)			<del></del>	<del> </del>		<del></del>	ļ		<del> </del>
ř	17	Interest			180.	<del> </del>		170.		·	10
Ę	18	Taxes (attach schedule) (see instructions)[3			180.	<del> </del>		170.	<b>-</b>		+ - 10
Έ	19	Depreciation (attach schedule) and depletio				<del> </del>					
A	20	Occupancy								<del></del>	<del> </del>
힏	21	Travel, conferences, and meetings				<del> </del>					<del> </del>
ē	22	Printing and publications				<del> </del>					<del> </del>
<u>,</u>	23 24 25	Other expenses (attach schedule)				<del>                                     </del>					<del> </del>
百	24	Total operating and administrative expens			2 702			170			2 612
		Add lines 13 through 23			3,783.	<del>                                     </del>		170.			1,750,000
		Contributions, gifts, grants paid			1,750,000.	-		170.	<u> </u>		<del></del>
$\neg$	26	Total expenses and disbursements. Add lines 24 and	25	-	1,753,783.	<del></del>		170.			1,753,613
	27	Subtract line 26 from line 12	- [		•						
		Excess of revenue over expenses and disbursements .			0.			0.		<del></del>	<del>                                     </del>
		Net investment income (if negative, enter -0	_	<del></del>		<del>                                     </del>		· · ·			<del> </del>
ı	C	Adjusted net income (if negative, enter -0-).	1			i			i		ı

JSA For Paperwork Reduction Act Notice, see instructions.

1290DP 766G 2/16/2016 4:44:50 PM

V 15-3F

16148.20

Form 990-PF (2015)

SCANNED APR 15 2016

Part II		Attached schedules and amounts in the	Beginning of year	E		nd of year		
نا	elti il	Balance Sheets description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Value		
	1	Cash - non-interest-bearing						
		Savings and temporary cash investments						
		Accounts receivable ▶						
		Less allowance for doubtful accounts ▶						
	4	Pledges receivable ▶		,	1	a annaha () .		
		Less allowance for doubtful accounts ▶						
		Grants receivable	1					
	6	Receivables due from officers, directors, trustees, and other	-					
		disqualified persons (attach schedule) (see instructions)						
		Other notes and loans receivable (attach schedule)				المراقع		
ţs		Less allowance for doubtful accounts ▶			1			
	8	Inventories for sale or use						
ssets		Prepaid expenses and deferred charges						
Ÿ	10a	Investments - U S and state government obligations (attach schedule)						
	b	Investments - corporate stock (attach schedule)						
	С	Investments - corporate bonds (attach schedule)						
		Investments - land, buildings, and equipment basis		-		,		
		Less accumulated depreciation (attach schedule)						
	12	Investments - mortgage loans		<u> </u>				
	13	Investments - other (attach schedule)						
	14	Land, buildings, and		;	- 1	24,		
	,	equipment basis Less accumulated depreciation (attach schedule)	<u> </u>					
	15	Other assets (describe ▶)				<del></del>		
		Total assets (to be completed by all filers - see the						
		instructions Also, see page 1, item I)	<u> </u>		0.	0		
	17 .	Accounts payable and accrued expenses						
	18	Grants payable						
es	19	Deferred revenue				•		
abiliti	20	Loans from officers, directors, trustees, and other disqualified persons						
ap	21	Mortgages and other notes payable (attach schedule)				,		
	22	Other liabilities (describe )				,		
_		Total liabilities (add lines 17 through 22)	0.		<u> </u>	· · · · · · · · · · · · · · · · · · ·		
<b>,</b> ,		Foundations that follow SFAS 117, check here . ▶		1				
ces		and complete lines 24 through 26 and lines 30 and 31	·		- 1			
aŭ	24	Unrestricted	ļ	<u> </u>	[	,		
a	25	Temporarily restricted			[			
פ	26	Permanently restricted				• •		
٥		Foundations that do not follow SFAS 117, $\blacktriangleright X$		j	J	•		
Ž		check here and complete lines 27 through 31.						
S	27	Capital stock, trust principal, or current funds				,		
Set	28	Paid-in or capital surplus, or land, bldg , and equipment fund						
ğ	29	Retained earnings, accumulated income, endowment, or other funds			_			
e	30	Total net assets or fund balances (see instructions)			0.	•		
Ż		Total liabilities and net assets/fund balances (see	1					
		Instructions)		<u></u>	0.			
		Analysis of Changes in Net Assets or Fund Bal						
1		I net assets or fund balances at beginning of year - Part			. }			
_		of-year figure reported on prior year's return)			1			
2	Ente	r amount from Part I, line 27a			2	0		
		er increases not included in line 2 (itemize)			3			
		lines 1, 2, and 3	• • • • • • • • • • • • • • • • • • • •		4	0		
		reases not included in line 2 (itemize)	-16) 5:::		5			
6	Fota	I net assets or fund balances at end of year (line 4 minu	s line 5) - Part II, column (	p), (ine 30 /	6	0		

Ō	art IV Capital Gains	and Losses for Tax on Inve	estment Income			rage <b>J</b>				
4		d describe the kind(s) of property sold (		(b) How acquired	(c) Date	(d) Date sold				
		rick warehouse, or common stock, 200	=	P - Purchase D - Donation	(mo, day, yr)	(mo , day, yr )				
1a	•			<u> </u>						
b										
d										
е										
	(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)						
<u>a</u>										
b										
C										
d										
е			11. 11. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.							
	Complete only for assets	showing gain in column (h) and owne	<del></del>		Gains (Col (h) g					
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	COI	(k), but not less t Losses (from co					
а		·								
b		<del></del>								
C	<del>-</del> ,									
d		·			<del></del> -					
3	Capital gain net income or (net capital loss)  If gain, also enter in Part I, line 7  If (loss), enter -0- in Part I, line 7  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									
Pa	rt V Qualification U	Inder Section 4940(e) for Red	duced Tax on Net Investment I	ncome						
Wa		the section 4942 tax on the distrib	outable amount of any year in the b	ase perioc	1?	Yes X No				
		not qualify under section 4940(e)	<del></del>							
1	Enter the appropriate am (a)		r, see the instructions before makin	ig any enti	ries (d)					
C	Base period years itendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	<del>,</del>	Distribution re (col (b) divided by					
	2014	1,251,719.								
	2013	1,251,433.								
	2012	9,284.								
	2011	75,162.								
	2010	<del></del>	<u> </u>		<del></del>					
2	Average distribution ratio	for the 5-year base period - divid	e the total on line 2 by 5, or by the sthan 5 years	3						
4	Enter the net value of no	ncharitable-use assets for 2015 fr	om Part X, line 5	4						
5	Multiply line 4 by line 3.			5						
6						<del></del>				
7										
8	Enter qualifying distribution of the second second in the second	eater than line 7, check the box	in Part VI, line 1b, and complete	8   that part	using a 1% tax	x rate. See the				

Form	990-PF (2015) PERENCHIO FOUNDATION 45-060			Page 4
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	nstru	ction	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0.
	here ▶ and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of ${\cal J}$			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2			<u> </u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			0.
6	Credits/Payments			
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a			
b	Exempt foreign organizations - tax withheld at source			
С.	Tax paid with application for extension of time to file (Form 8868) 6c			
ď	Backup withholding erroneously withheld			ο.
7	Total disease and payments had allowed at the agent of the state of th			<del>- • •</del>
8	and any periody for another than a southern a southern and a southern a south			0.
9	The date of the color of the co			<u> </u>
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	•		
_	Instructions for the definition)?	1b		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			
С	Did the foundation file Form 1120-POL for this year?	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
	foundation managers ▶ \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		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		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
ь	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		X
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 child the production of the pro			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	6	х	
,	conflict with the state law remain in the governing instrument?	7	:-	х
7	Enter the states to which the foundation reports or with which it is registered (see instructions)			
8a	CA,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			}
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b		
9	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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"			
	complete Part XIV	9_		х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
. •	names and addresses	10	Х	
		m 99	0-PF	(2015)

.

Pa	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	<u> </u>	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ▶ KATHLEEN ANTION Telephone no ▶ 310-556		0	
	Located at ▶ 1999 AVENUE OF THE STARS, #3050 LOS ANGELES, CA ZIP+4 ▶ 90067-4	643		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		<u>X</u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of	-		
	the foreign country ▶	L		
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required		1	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)		[ ' ]	. '
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No		١. ا	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			,
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		· .	
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days).	,		
		,	1 1	
В	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1b		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	10		
	Organizations relying on a current notice regarding disaster assistance check here		′	
·	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?	10		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1		<del></del>
•	operating foundation defined in section 4942(j)(3) or 4942(j)(5))		ا'، ، ا	1
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and			,
_	6e, Part XIII) for tax year(s) beginning before 2015?			
	If "Yes," list the years		ı	,
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			•
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		1 1	
	all years listed, answer "No" and attach statement - see instructions )	2b		X
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<b>&gt;</b>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?	١,		
þ	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2015)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
þ	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 2015?	4b		X
	Fo	m 99	v-PF	(2015)

Form 9	990-PF (2015) PERENCHIO FOU				0607892	Page 6
Par	t VII-B Statements Regarding Activities	for Which Form	4720 May Be Red	uired (continued)		
5a	During the year did the foundation pay or incur any am	ount to				
	(1) Carry on propaganda, or otherwise attempt to influ	ience legislation (section	on 4945(e))?	. Yes X N	0	
	(2) Influence the outcome of any specific public el	ection (see section	4955), or to carry or			
	<ul><li>directly or indirectly, any voter registration drive?.</li></ul>			. Yes X N	o	
	(3) Provide a grant to an individual for travel, study, or	other similar purposes	?	. Yes X N	0	ľ
	(4) Provide a grant to an organization other than a	a charitable, etc., orç	ganization described			
	section 4945(d)(4)(A)? (see instructions),			. Yes X N	0	
	(5) Provide for any purpose other than religious, of	haritable, scientific,	literary, or education		1 1	
	purposes, or for the prevention of cruelty to children				- 1	
b	If any answer is "Yes" to 5a(1)-(5), did any of the					ł
	Regulations section 53 4945 or in a current notice rega	rding disaster assistar	nce (see instructions)?		· 5b	
	Organizations relying on a current notice regarding disa				<b>'</b>	
С	If the answer is "Yes" to question 5a(4), does the		•			
	because it maintained expenditure responsibility for the	_		Yes N	°	
	If "Yes," attach the statement required by Regulations se	• •				
6a	Did the foundation, during the year, receive any fu					
	on a personal benefit contract?			Yes XN		
b	Did the foundation, during the year, pay premiums, dir	ectly or indirectly, on a	i personal benefit contra	act /	. 6b	
7.	If "Yes" to 6b, file Form 8870 At any time during the tax year, was the foundation a p	arty to a prohibited to	v chaltar transaction?	Yes X N		
	If "Yes," did the foundation receive any proceeds or ha				-	ŀ
	t VIII Information About Officers, Directo					
	and Contractors					
1	List all officers, directors, trustees, foundation	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense a	ccount
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allowa	
ATCI	i 4		0.	0.		0.
				ļ		
	·					
					1	
	Compensation of five highest-paid employees	(other than thes	e included on lin	o 1 - see instruct	ions) If none	a enter
	"NONE."	(other than thos		e i - sec matruct	ions). Il none	s, enter
	None and address of each analysis and something 000,000	(b) Title, and average	(-) (	(d) Contributions to employee benefit	(e) Expense a	ccount,
(a)	Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred compensation	`óthér allowa	
			<u> </u>			
	NONE					
					l	
		1		1	1	
						· ·

Form 990-PF (2015)

Form 990-PF (2015)

Page 8

Par	Minimum Investment Return (All domestic foundations must complete this part Fosee instructions)	reign foundat	ions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.	<b>&gt;</b> ,	
	purposes	1 1	
а	Average monthly fair market value of securities	1a	
	Average of monthly cash balances	1 44 1	
	Fair market value of all other assets (see instructions).	1c	
ď			0.
е			
	1c (attach detailed explanation)1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	<u> </u>
4	Subtract line 2 from line 1d  Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, se	e	
	instructions)	. 4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line	4 5	0.
6	Minimum investment return. Enter 5% of line 5	6	0.
Par	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations check here ▶ □ and do not complete this part )	oundations	
1	Minimum investment return from Part X, line 6	1	·
2 a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015 (This does not include the tax from Part VI).		
C		. 2c	
3	Distributable amount before adjustments Subtract line 2c from line 1		
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4		
6	Deduction from distributable amount (see instructions)		
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XI		
	line 1	1 - 1	0.
Par	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26		1,753,613.
b	Program-related investments - total from Part IX-B	. 1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc purposes		
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	. 3a	
b		3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line	4 4	1,753,613.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment incom		
	Enter 1% of Part I, line 27b (see instructions)		0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,753,613.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when qualifies for the section 4940(e) reduction of tax in those years	calculating w	hether the foundation

Form **990-PF** (2015)

Page 9

Pa	rt XIII Undistributed Income (see instr	uctions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2015 from Part XI,	Corpus	Years prior to 2014	2014	2015
	line 7				0.
2	Undistributed income, if any, as of the end of 2015		1		
	Enter amount for 2014 only				
b	Total for prior years 20 13 ,20 12 ,20 11		<del></del>		
3	Excess distributions carryover, if any, to 2015				
а	From 2010				
b	From 2011	:			
C	From 2012				
d	From 2013				
	From 2014	0 505 500			
	Total of lines 3a through e	2,587,598.	· · · · · · · · · · · · · · · · · · ·	-	
4	Qualifying distributions for 2015 from Part XII,				
	line 4 ▶ \$ 1,753,613.				
а	Applied to 2014, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required - see instructions),			<del> </del>	
C	Treated as distributions out of corpus (Election				
	required - see instructions)				
	Remaining amount distributed out of corpus	1,753,613.			
	Excess distributions carryover applied to 2015.				•
•	(If an amount appears in column (d), the same				
	amount must be shown in column (a)) Enter the net total of each column as				
•	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	4,341,211.			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has	18			
	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				
e	4a from line 2a Taxable amount - see				
	instructions				
f	Undistributed income for 2015 Subtract lines				
	4d and 5 from line 1 This amount must be distributed in 2016				
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 2010 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016.				
	Subtract lines 7 and 8 from line 6a	4,341,211.		· · · · · · · · · · · · · · · · · · ·	
10	Analysis of line 9				
	Excess from 2011				
	Excess from 2012 9, 284				
	1 251 710				
	2.00035 HOIII 2014				
e	Excess from 2015 1, /53, 613.		1		

. .

_	rt XIV Private Op	erating Foundations	(see instructions a	ind Part VII-A, questi	on 9)	NOT APPLICABLE
	If the foundation has					
	foundation, and the rulin				-	
h	Check box to indicate					(j)(3) or 4942(j)(5)
	_	Tax year	is a private speraning	Prior 3 years		T
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
	I or the minimum investment		(5) 2014	(0) 20 10	(4) 2012	
	return from Part X for each	1			1	1
	year listed			<del> </del>		<del>  - · · </del>
b	85% of line 2a					<del> </del>
C	Qualifying distributions from Part					
٦	XII, line 4 for each year listed .  Amounts included in line 2c not					
٠	used directly for active conduct	•				
	of exempt activities					<del></del>
е	Qualifying distributions made directly for active conduct of					
	exempt activities Subtract line			}	1	
3	2d from line 2c					<del> </del>
•	alternative test relied upon					
а	"Assets" alternative test - enter				,	
	(1) Value of all assets	<del>-</del>		<del> </del>		<del> </del>
	(2) Value of assets qualifying under section					
	4942(j)(3)(B)(i)					<del> </del>
D	"Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X,	İ	l			
	line 6 for each year listed		<u>-</u> -			<del></del>
C	"Support" alternative test - enter					
	(1) Total support other than gross investment income					
	(interest, dividends, rents,					
	payments on securities loans (section 512(a)(5)),			1		
	or royalties)					<del> </del>
	(2) Support from general public and 5 or more					
	exempt organizations as					
	(i)(3)(B)(III)		·			<u> </u>
	(3) Largest amount of sup- port from an exempt					
	organization			<u> </u>		<u> </u>
	(4) Gross investment income			L., <u>.</u>	<u></u>	<u></u>
Pa				only if the founda	tion had \$5,000 o	r more in assets at
_		uring the year - see		······		
1	Information Regarding					
а	List any managers of before the close of any	the foundation who f	nave contributed mor	e than 2% of the tota	Bi contributions recei	ved by the foundation
			icy have contributed i	11010 (11411 \$5,000). (0	cc 3cc.ion 007 (d)(2) )	
	A. JERROLD				<del></del>	
b	List any managers of					ly large portion of the
	ownership of a partner	snip or other entity) or	which the foundation	i nas a 10% of greater	mieresi	
_	NONE	- Contails dies Const	Ciff I am Cabalana	nin ata Basanana		
2	Information Regardin	- · · · · · · · · · · · · · · · · · · ·				
						and does not accept
	other conditions, comp			ants, etc (see instruc	tions) to individuals	or organizations under
				tha a a a a a a a a a a a a a a a a a a	nington about he as	14
а	The name, address, a	na telephone number	or e-mail address or	the person to whom ap	plications should be at	laressea
_	ATCH 5				ماد مام ماد مام	
D	The form in which app	iications snould be sut	miceo and information	on and materials they	SHOULD INCIDICE	
	ATCH 6					
_	Any submission deadli	nes		<del></del>		<del></del>
U	,, Subimosion dedul					
	N/A					
d	Any restrictions or li	mitations on awards.	such as by geogr	aphical areas, charita	able fields, kinds of	institutions, or other
	factors.					
	N/A					
ISA		-				

Page **11** 

Form 990-PF					Page 11
Part XV	Supplementary Information (	continued)			
3 Gran	nts and Contributions Paid Duri Recipient e and address (home or business)	ng the Year or Appr	oved for I	uture Payment	<del></del>
	Recipient	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name	e and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid d	during the year				
ATCH 7					
AICH /		1	}		
				1	
					1
				ĺ	
		]			
					•
		i			
		]			
Total				▶ 3a	1,750,000.
	oved for future payment		1		
ATCH 8					
			1		
			1	}	
		1	1		1
		1	}		1
					1
					]
Total				▶ 3b	2,000,000.

JSA 5E1491 1 000

Form 990-PF (2015)

Page **12** 

Рa	rt XVI-	A Analysis of Income-Prode	ucing Act	ivities			
		amounts unless otherwise indicated	Unrel	ated business income (b)	Excluded b	y section 512, 513, or 514 (d)	(e) Related or exempt function income
1	Program	service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
•	a	<del></del>			<del> </del>		
-	b				<b></b>		
•	c				<b>_</b>		
	d		<u> </u>		ļ		
	·						
1	·				ļ		
9	g Feesa	and contracts from government agencies			ļ		
2	Members	thip dues and assessments			<u> </u>		
3 1	nterest or	savings and temporary cash investments			ļ		
4	Dividends	s and interest from securities					
5	Net renta	Il income or (loss) from real estate			ļ		
	Debt-	financed property					
		ebt-financed property					
		income or (loss) from personal property.					
		restment income					
		pss) from sales of assets other than inventory					
		- 1					
		ne or (loss) from special events · · · · bofit or (loss) from sales of inventory					
		enue a		<del></del>	<u> </u>		
							<del></del>
							<del></del>
	, —				<del>                                     </del>		
		Add columns (b), (d), and (e)					
						42	
		d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcu					
	rt XVI-E			ccomplishment of E	xempt Pur	noses	
	-						
Lir	e No.	Explain below how each activity					
	▼	accomplishment of the foundation	n's exemp	t purposes (other than	by providing	tunds for such purposes	s) (See instructions)
N	ONE						
	-	<del></del>		<del></del>			<del></del>
	<del>  </del>			<del></del>			
					·		
						<del>- · · · · · · · · · · · · · · · · · · ·</del>	
		<del></del>					<del></del>
				<del></del>		<del></del>	<del></del>
				· <del></del>	<del></del>		<del></del>
		<del></del>				<del></del>	<del></del>
				<del></del>			
					<del></del>		
				<del></del>			<del></del>
						<del></del>	<del></del>
		<del></del>					
						···	· · · · · · · · · · · · · · · · · · ·
						· · · <del></del>	
						<del></del>	- 000 DE

Form	990-PF	(2015)		O FOUNDATION		45-060			ge 13
Par	t XVI	Information R Exempt Orga		ansfers To and Trar	sactions a	nd Relationships With Non	char	itabl	е
1	ın se orgar	ction 501(c) of the Conizations?	ode (other than	section 501(c)(3) organ	izations) or in	any other organization described is section 527, relating to political		Yes	No
а			-	o a noncharitable exempt	-				
									X
b		ther assets r transactions					1a(2)		X
									X
									<u> </u>
									X
									X
									X
									X
								<u>.                                    </u>	<u> </u>
d	value	of the goods, other	assets, or serv	ices given by the report	ing foundatio	Column (b) should always shown If the foundation received less to of the goods, other assets, or see the contract of the goods.	than	fair m	narke
(9) (	ne no	(b) Amount involved	, <u>-</u>	noncharitable exempt organizati	<del></del>	escription of transfers, transactions, and sha			
(a) L		N/A	(c) Name of	TOTICITATINADIE EXEMPLOTGAMIZATI	N/A		aning and		ins
		N/A			1 17 1	<u> </u>			
			-						
	<del></del> -								
			<del>                                     </del>						
			<del> </del>						
_									
_		·· <del>··</del>							
				-				-	
					-				
						· · · · · · · · · · · · · · · · · · ·			
2a		<u>-</u>	•	filiated with, or related ther than section 501(c)		ore tax-exempt organizations	Y	es X	 ] No
b	<u>If "Ye</u>	s," complete the follo	wing schedule						
_		(a) Name of organization	n	(b) Type of organiz	ation	(c) Description of relation	ship		
						ļ			
	<del></del>								
	Und	ier penaities of perjury, I decla ect, and complete Declaration of	are that I have exam preparer (othershall)	ined this return, including accompa axpayer) is based on all information of	anying schedules a of which preparer ha	nd statements, and to the best of my knowled as any knowledge	ge and t	elle!, it	is true
Sigr		/M/1 /1	0117	1. 16/2/2	1.1	<i>l</i>	S discus	s this	return
Her	,   🛂	1 minoe	ryou	210 21/8	7/6 7/	Describer with the p	reparer	shown	below
	S	gnature of officer or trustee		Date	Title	(see instruction	ns)?	Yes	X

Form 990-PF (2015)

If PTIN

Firm's EIN ▶ 95-4345526

self-employed P00537370

626-243-5100

Check

Phone no

**Paid** 

Preparer

Use Only Firm's address ▶ 350 W. COLORADO BLVD, 5TH FLOOR PASADENA,

▶ HOLTHOUSE CARLIN & VAN TRIGT LLP

Print/Type preparer's name

Firm's name

VICKEN HALEBLIAN

Date

91105

315 4

#### Schedule B

(Form 990, 990-EZ, or 990-PF)
Department of the Treasur

### **Schedule of Contributors**

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

Department of the Treasury Internal Revenue Service

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

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

OMB No 1545-0047

2015

Name of the organization			Employer identification number
PERENCHIO FOUNDATIO			
			45-0607892
Organization type (check on	)		
Filers of:	Section:		
Form 990 or 990-EZ	501(c)( ) (enter number	r) organization	
	4947(a)(1) nonexempt charm	able trust not treated as a private fou	indation
	527 political organization		
Form 990-PF	X 501(c)(3) exempt private fou	ndation	
	4947(a)(1) nonexempt chard	able trust treated as a private foundate	tion
	501(c)(3) taxable private fou	ndation	
	501(c)(5) taxable private fou	ngalion	
nstructions	), (8), or (10) organization can check (	boxes for both the General Rule and a S	Special Rule See
Seneral Rule			
	filing Form 990, 990-EZ, or 990-PF the or property) from any one contributor ontributions	<del>-</del>	
Special Rules			
regulations under s 13, 16a, or 16b, ar	described in section 501(c)(3) filing Fections 509(a)(1) and 170(b)(1)(A)(vi) that received from any one contribute the amount on (i) Form 990, Part VII	, that checked Schedule A (Form 990 or, during the year, total contributions	or 990-EZ), Part II, line s of the greater of (1)
contributor, during	described in section 501(c)(7), (8), or he year, total contributions of more the nal purposes, or for the prevention of	an \$1,000 <i>exclusively</i> for religious, ch	aritable, scientific,
For an organization contributor, during contributions totale during the year for General Rule appli	described in section 501(c)(7), (8), or the year, contributions exclusively for reference than \$1,000. If this box is checkin exclusively religious, charitable, etc. is to this organization because it received to the during the year	(10) filing Form 990 or 990-EZ that re eligious, charitable, etc., purposes, bu ked, enter here the total contributions , purpose Do not complete any of the red nonexclusively religious, charitable	eceived from any one it no such s that were received a parts unless the received a contributions
Caution. An organization that 390-EZ, or 990-PF), but it mu	is not covered by the General Rule are t answer "No" on Part IV, line 2, of its certify that it does not meet the filing	nd/or the Special Rules does not file S Form 990, or check the box on line h	chedule B (Form 990, H of its Form 990-EZ or on its
or Paperwork Reduction Act Notic	, see the instructions for Form 990, 990-EZ, or	990-PF. Schedule	B (Form 990, 990-EZ, or 990-PF) (201

JSA 5E1251 2 000 Name of organization PERENCHIO FOUNDATION

Employer identification number 45-0607892

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	A. JERROLD PERENCHIO  1999 AVENUE OF THE STARS, #3050  LOS ANGELES, CA 90067	\$\$.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization PERENCHIO FOUNDATION

Employer identification number

45-0607892

Part II	Noncash Property (see instructions). Use duplicate copies	of Part II if additional space is ne	eded.
(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
		<b> \$</b>	
(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
		   \$	

	(Form 990, 990-EZ, or 990-PF) (2015) organization PERENCHIO FOUNDATION		Page   Employer identification number
	TEREMONIO TOURDITION		45-0607892
		ar from any one cor impleting Part III, ente (Enter this information	<b>stributor.</b> Complete columns (a) through (e) and r the total of <i>exclusively</i> religious, charitable, etc
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, and ZIP + -	4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, and ZIP +	4	Relationship of transferor to transferee
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, and ZIP +	4	Relationship of transferor to transferee
	Transferee's fiame, address, and ZIF +	-	relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
}	Transferee's name, address, and ZIP +	4	Relationship of transferor to transferee

ATTACHMENT 1

ATTACHMENT 1

I
FEES
LEGAL
- 1
H
PART
990PF,
FORM

CHARITABLE PURPOSES	2,103.	2,103.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	2,103.	2,103.
		TOTALS
DESCRIPTION	LEGAL	

c
CHMENT
ATTA

45-0607892

II
FEES
ACCOUNTING
1
PART
990PF,
FORM

CHARITABLE PURPOSES	1,500.	1,500.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	1,500.	1,500.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

ATTACHMENT

FORM 990PF, PART I - TAXES

10.

TAXES

DESCRIPTION

180.

180.

TOTALS

170.

ATTACHMENT 3

V 15-3F 1290DP 766G 2/16/2016 4:44:50 PM

ATTACHMENT 4

45-0607892

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

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

A. JERROLD PERENCHIO

PRESIDENT

1999 AVENUE OF THE STARS

3050

LOS ANGELES, CA 90067

KATHLEEN ANTION

TREASURER & CFO

LOS ANGELES, CA 90067 3050

MICHAEL A. ENRIGHT 1999 AVENUE OF THE STARS

1999 AVENUE OF THE STARS

SECRETARY

LOS ANGELES, CA 90067

16148.20

ATTACHMENT 5

### FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

PERENCHIO FOUNDATION 1999 AVENUE OF THE STARS, #3050 LOS ANGELES, CA 90067 310 556-7600

ATTACHHENT O	Α	TTA	CHMENT	6
--------------	---	-----	--------	---

# 990PF, PART XV - FORM AND CONTENTS OF SUBMITTED APPLICATIONS

APPLICATION SHOULD BE IN WRITTEN FORM ACCOMPANIED WITH A COPY OF THE ORGANIZATIONS TAX EXEMPTION LETTER.

FOUNDATION	
PERENCHIO	

45-0607892

KE
PAID DURING THE
S
a
W S
đ
BUTI
NTRI
Я
AND
ᅦ
ANT
톙
JI
PART X
M
340
990
盈
8

RECIPIENT NAME AND ADDRESS  RECIPIENT NAME AND ADDRESS  RECIPIENT NAME AND ADDRESS  RECIPIENT AND ADDRESS  RECIPIENT AND ADDRESS  RECIPIENT AND ADDRESS  RECIPIENT BUND  PURPOSE OF GRANT OR CONTRIBUTION  PC  GENERAL CHARITABLE PURPOSE  1,250,000  1,250,000  1,250,000  1,250,000  1,250,000  1,250,000  1,250,000  1,250,000				ATTACHMENT 7
PURPOSE OF GRANT OR CONTRIBUTION  PC  GENERAL CHARITABLE PURPOSE  PC  GENERAL CHARITABLE PURPOSE  PC		RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		•
PC GENERAL CHARITABLE PURPOSE  PC GENERAL CHARITABLE PURPOSE	IENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
PC GENERAL CHARITABLE PURPOSE	MY FOUNDATION WILSHIRE BLVD LY HILLS, CA 90211	PC	GENERAL CHARITABLE PURPOSE	1,250,000
	LOS ANGELES OPERA COMPANY 135 N GRAND AVE LOS ANGELES, CA 90012	PC	GENERAL CHARITABLE PURPOSE	200,000

1,750,000

TOTAL CONTRIBUTIONS PAID

ATTACHMENT 7

16148.20

4 44:50 PM

UNDATIO	
PERENCHIO FO	

45-0607892

ATTACHMENT 8		AMOUNT	2,000,000
		PURPOSE OF GRANT OR CONTRIBUTION	GENERAL CHARITABLE PURPOSE
ED FOR EUTURE DAYMENT	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND	FOUNDATION STATUS OF RECIPIENT	PC .
EORM 990PF, PART XV - CONTRIBUTIONS APPROVED FOR EUTURE PAYMENT		RECIPIENT NAME AND ADDRESS	LOS ANGELES OPERA COMPANY 135 N GRAND AVE LOS ANGELES, CA 90012

2,000,000 TOTAL CONTRIBUTIONS APPROVED

ATTACHMENT 8