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# Form **990-PF**

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

OMB No 1545-0052

2015

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 <a href="https://www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

Open to Public Inspection

For cal	endar	r year 2015, or t	ax year beginni	ng			015	, and e	nding	<u></u>		,				
Name of f											Α		dentification	num	ber	
Remy	S (	Good Day From the Corporation of	und	d to street :	address)			Room/su	ute		В		70786_ number (see in		ational .	
					addicas,			/ COM//SC	inc		-		841-4		-	
City or tov	n, state	versity Ave	and ZIP or foreign po	stal code					$\vdash$							
Berke	eley				CA 94710-1616				C If exemption application is pending, check here.					k here. ►		
G Che	ck all	that apply	Initial return		Initial return of a former public charity				To deference amongsthank about home							
			Final return	Ī	Ame	nded return		•		-	D 1 Foreign organizations, check here ▶					
		ĺ	Address char	nge	Nam	e change					1				ing the 85% te	
H Che	ck tvi	pe of organizatio			1(c)(3) exempt private foundation				here and attach computation							
ſ		ction 4947(a)(1) i				Other taxat				ition	E	If private fo	undation sta	tus v	was terminate	:d
I Fair		t value of all assets a				method	·	ash	XAc		ĺ				check here .	
		II, column (c), line 16			Other (s	L			تت		F	If the found	ation is in a	60 <u>-</u> π	nonth terminal	tion —
<b>►</b> \$		15	,786.	(Part I,		(d) must be	on c	ash ba	sīs)		'		on 507(b)(1)			···· - []
Part I	A	nalysis of Re		<u> </u>	(2) 5	Revenue and		(b) N	let inv	estment		(c) Adu	sted net	Ť	(d) Dishu	rsements
	E	xpenses (The	total of amounts	ın		ses per bool		(5,10	inco				ome	ı		aritable
	co sa	lumns (b), (c), ar rily equal the am	nd (d) may not no nounts in column	eces- (a)	}			{						- }		oses
		ee instructions))	iourno na columna	(4)	ļ	ĺ								(cash basis only)		
	1	Contributions, gifts, grant	ts etc, received (attach sch	nedule)		20,00		<b>.</b>	*		¥ Ž	14.1	` 4005	2	(C)	*# 1
	2	Ck ► if the fou	indation is <b>not</b> required to a	attach Sch B	. T.	. 58	**		, J	şî.	**************************************	建铁	. **	$\Box$	. B// 7	) ``{
	,	Interest on source and to	emporary cash investments	<b>.</b>			1				1			T	40 ; .	
	3	-	•	 	<u> </u>	<del>-</del>	1.				⊥•			+		
	Dividends and interest from securities     Sa Gross rents     b Net rental income or (loss)			<u> </u>				-					-+			
				·	in the state of th	ia, y :	35		is d			.5344	$\dashv$	### 5 #	1 6 4	
R	6 a	Net gain or (loss) from sa	ale of assets not on line 10		<del> </del>		erry	. #	, 3,	- 1200A			12	oğ 1	**************************************	
Ε	b	Gross sales price for assets on line 6a .	r all		- 17	45	3 2	8/	. j. v.		. #	<b>*</b>	Ž.	Ţ,		100000
V E	7		me (from Part IV, line	2)			140					, 107	* 3 2	Ř	<i>1</i> 01	: 45
N	8	Net short-term capital	-				. 🕸		<i>#</i>	/ ** s	•					71 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
U E	9	Income modifications Gross sales less	s ·		* 4	ζ) <u>1</u>		: 💥		<i>i</i> 3				$\Box$	<b>≱</b> ₹ ₹,	
-	10 a	returns and allowances			3	. 7%	,			*	4	330 E		Ø		13
	b	Less Cost of			2658,740 22 833				***	. s~~	**	29 A		<del>"</del>	8888 V	
	_ ا	goods sold • Gross profit or (loss) (alla	ach schodula)		1 925	× , , , , , , , , , , , , , , , , , , ,		3 X X	4	<u> </u>	<u>-</u>		<u> </u>	× 1	3 3	<u> </u>
	11	Other income (attach		 	` <del> </del>	<del></del>		<u> </u>	Ą.	· · · · · · · · · · · · · · · · · · ·	٠.*				<del></del>	<u> </u>
	''	- · · · · · · · · · · · · · · · · · · ·	,											ľ		
	12	Total Add lines 1	through 11 · · ·			20,00	1.				1.			$\dashv$		* 84
	13	Compensation of offi	icers, directors, trustee	es, etc - ·	1									$\dashv$		
	14	Other employee sa	alaries and wages													
	15	Pension plans, empl	oyee benefits													
A		Legal fees (attach so	•											$\Box$		
D M I	ı	Accounting fees (atta				2,77	5.		7							2,775.
l N	C	Other prof fees (atta	ach sch $)$ . $L-160$	: Stmt.	L	2,43	0.	I PE		<u>. ب</u> و	1 1 195 Cm C	ال ال	$\Box$		3,298.	
PS	17	Interest · · ·			<u> </u>					00000	-J V-	علالا بالعبدر	10			
PERA	18	Taxes (attach schedule)(							12	<del>- MO-u</del>			1651			
A A T T	19	Depreciation (attach schedule) and deplet	tion					ĺĺ	A	NUV	Z	<b>9</b> 2016	3	ĺ		
i i N V	20		· · · · · · · · ·		<del></del>			<u> </u>	-	-	ro-errora			-1	4%(A. 68° W Y	<u>. 25 . 14 . 1</u>
Ĝέ	21	Travel, conferences,	and meetings					1 8		OGL	定	N. UT		$\dashv$		
A E N X D P	22	Printing and publicate	ions					· ·		20 Mar - 1 Mar	-			$\neg$		
	23	Other expenses (atta											<u></u>	$\neg$		
E N		See Line 23 Sti	<del></del>	<del></del>	ļ	23	1.	ļ		_				-4		231.
S E	24	Total operating and expenses Add lines				5,43	6							- 1		6 204
S	25	Contributions, gifts, grant	•		<del> </del>	9,60	0.	(A)		Section 1	28 /	3-1-1		ă		6,304. 9,600.
		Total expenses and	•			2,00			<del></del>	2724 23	^	<u>s</u>		<del>~</del>		<i></i>
		-				15,03	6.									15,904.
	27	Subtract line 26 from			-784 .		****	1, 53	1	( P	, g., -1	. Ř	Capp. (		7 <b>S</b>	1 11112
	а	Excess of revenue of and disbursements	•			4 07	_		sv., 2		****			*	a MT	
	h	Net investment inco		· · · ·	Septy.	4,96		<b> </b> -		200 8	1	\(\hat{\chi_{\chi}}\)	- I	*	<u> </u>	1 (v 1
			ome (ir negative, enter-0		## W.		CASE	3 4/5			1.	* `	···	$\dashv$	<u> </u>	<del></del>

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Par	<del>(III</del>	Balance Sheets  Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	f year
		(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	₹1	Cash – non-interest-bearing	11,690.	15,786.	15,786.
	2	Savings and temporary cash investments			
	3	Accounts receivable · · · · · · · . ▶		28 . 2 . 32 . 32 . 3	
		Less: allowance for doubtful accounts			,
	4	Pledges receivable		L. N.V	
		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)			
Α	1	Less allowance for doubtful accounts	ACC	1865	
S	8	Inventories for sale or use		<del>_</del>	<del></del>
S E T	9	Prepaid expenses and deferred charges	<u> </u>		<del> </del> -
T S	1	a Investments – U S and state government obligations (attach schedule)			
		b Investments — corporate stock (attach schedule)			
	1	c Investments — corporate bonds (attach schedule)			
	1	, , , , ,	/ in . /		
	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			** !wi
		Less accumulated depreciation (attach schedule)			
	15 16	`	11,690.	15,786.	15,786.
L	17	Accounts payable and accrued expenses	0.		
A	18	Grants payable			
В	19	Deferred revenue		<del></del>	
ļ	20	Loans from officers, directors, trustees, & other disqualified persons	- · · · · · · · · · · · · · · · · · · ·		
ī	21	Mortgages and other notes payable (attach schedule)			
Ţ	22		869.	<del></del>	
E				<del> </del>	
E S	23		869.		
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
NF	24	Unrestricted	10,821.	15,786.	
N F E U T N	25	Temporarily restricted			
ת	26	Permanently restricted			
A B S A E A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
ĔĹ	27	Capital stock, trust principal, or current funds			
SN	28	Paid-in or capital surplus, or land, bldg , and equipment fund			1 · * * * * * * * * * * * * * * * * * *
С	29	Retained earnings, accumulated income, endowment, or other funds			
O E R S	30	Total net assets or fund balances (see instructions)	10,821.	15,786.	
	31	Total liabilities and net assets/fund balances (see instructions)	11,690.	15,786.	
Par	t III	Analysis of Changes in Net Assets or Fund Balanc		-	
	Tota	I net assets or fund balances at beginning of year — Part II, column (of-year figure reported on prior year's return)	(a), line 30 (must agree v	vith 1	10 021
2		r amount from Part I, line 27a · · · · · · · · · · · · · · · · · · ·			10,821.
3				<del></del>	4,965.
3 4		lines 1, 2, and 3 · · · · · · · · · · · · · · · · · ·			15 506
_	_			<u> </u>	15,786.
5	Decre	l net assets or fund balances at end of year (line 4 minus line 5) – P	ort II. column (h) III CC	5	15.55
6	ı ota	i net assets or rung palances at end of year (line 4 minus line 5) — P	art II, column (b), line 30	6	15,786.

orm 990-PF (2015) Remy's				46-2070786	Page 3
	d Losses for Tax on Investmen		/b)	1 (2) 2	- (d) a
(a) List and descri 2-story brick wareho	be the kind(s) of property sold (e.g., real use, or common stock, 200 shares MLC	estate, Company)	(b) How acquire P — Purcha	ase (mo, day, yr)	( <b>d</b> ) Date sold (mo , day, yr )
			D — Donat	ion	<del>                                       </del>
1 a b	<del></del>			<del>-  </del>	-
C				<del> </del>	<del> </del>
		· · · · · · · ·		<del></del>	
_ <del></del>	<del></del>			<del></del>	
(e) Gross sales price	(f) Depreciation allowed	(g) Cost or other basi	s	(h) Gain o	r (loss)
(с) стого селес рина	(or allowable)	plus expense of sale		(e) plus (f) m	
a					
b					
C					
d					
е					
<del></del>	owing gain in column (h) and owned by th			(I) Gains (C	
(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		gain minus col (k), than -0-) or Losses (	
a					
b					
С					
d				· <del></del>	
<u>e</u>					
section 4940(d)(2) applies, leave as the foundation liable for the se Yes,' the foundation does not qu	ection 4942 tax on the distributable amou alify under section 4940(e) Do not comp	nt of any year in the base pe lete this part	eriod?	· · · · · · · · · Yes	No
<ol> <li>Enter the appropriate amoun</li> </ol>	t in each column for each year; see the ir	structions before making ar	y entries		
(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	ets	(d) Distribution (col (b) divided by a	n ratio
2014	13,429.	1:	2,043.		1.11508
2013	9,884.		7,223.		1.36840
2012					
2011					
2010				·· <del>-</del> ···	
Tetal of line 4 solumn (4)				2	0
•			}	2	2.48349
3 Average distribution ratio for number of years the foundati	the 5-year base period — divide the total on has been in existence if less than 5 years.	on line 2 by 5, or by the ears		3	1.24174
Enter the net value of noncha	antable-use assets for 2015 from Part X,	line 5		4	7,730
Multiply line 4 by line 3				5	9,599
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b)			6	0
7 Add lines 5 and 6				7	9,599
8 Enter qualifying distributions	from Part XII, line 4			8	15,904
If line 8 is equal to or greater Part VI instructions	than line 7, check the box in Part VI, line	1b, and complete that part	using a 1%	tax rate See the	
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	VI 🙀 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions		
1 a		AK *	# j
	Date of ruling or determination letter (attach copy of letter if necessary — see instrs)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V,		0.
	check here . X and enter 1% of Part I, line 27b	, , , , , , , , , , , , , , , , , , ,	} }}
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)	i diicdi	
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	<u> </u>	0.
3	Add lines 1 and 2		0.
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.
	Credits/Payments	*****	`
	2015 estimated tax pmts and 2014 overpayment credited to 2015	ĺäð	2., t
	Exempt foreign organizations — tax withheld at source		
	Tax paid with application for extension of time to file (Form 8868)		7 1
d	Backup withholding erroneously withheld		. [
7	Total credits and payments Add lines 6a through 6d		0.
8	Enter any penalty for underpayment of estimated tax. Check here		0.
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		0.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		0.
11	Enter the amount of line 10 to be Credited to 2016 estimated tax Refunded 11		
Par	t VII-A Statements Regarding Activities	·	
1 a	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?	1 a	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1 b	Х
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published		
_	or distributed by the foundation in connection with the activities  Did the foundation file Form 1120-POL for this year?	1 c	<b>3</b> 3
q	Enter the amount (if any) of tay on political expenditures (section 4955) imposed during the year	×	X
	(1) On the foundation • \$ (2) On foundation managers • \$		ríďul
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	Х
	If 'Yes,' attach a detailed description of the activities	asi i r	×
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
<b>1</b> =	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a	X
	If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?	4 b	<u> </u>
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	Х
•	If 'Yes,' attach the statement required by General Instruction T		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	4 *	
·	By language in the governing instrument, or		25.1
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict		
_	with the state law remain in the governing instrument?	6 X 7 X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col (c), and Part XV	7 X	1 2 2
8 а	Enter the states to which the foundation reports or with which it is registered (see instructions)	* 1: TOP.	***
	See States Registered In		, ,
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	8 b X	* *
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	X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	10	X
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determine if the foundation had excess business holdings in 2015). . . . . .

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Part VII-B Statements Regarding Activit		i 4720 May Be Req	uired (continued)	
<ul><li>5 a During the year did the foundation pay or incur a</li><li>(1) Carry on propaganda, or otherwise attempt t</li></ul>	•	ection 4945(e))?	Yes X	No
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registration	election (see section 495 n drive?	5), or to carry	Yes X	No No
(3) Provide a grant to an individual for travel, stu			· · · · Yes X	No No
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions).			Yes X	No
(5) Provide for any purpose other than religious, educational purposes, or for the prevention of	charitable, scientific, lite of cruelty to children or ar	rary, or nımals?	· · · · Yes X	No
<b>b</b> If any answer is 'Yes' to 5a(1)-(5), did <b>any</b> of the described in Regulations section 53 4945 or in a (see instructions)?	current notice regarding	disaster assistance		5b
Organizations relying on a current notice regardi	ng disaster assistance ch	neck here	▶ [	
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsibulif 'Yes,' attach the statement required by Regula:	ılıty for the grant?		· · · · Yes	No .
6 a Did the foundation, during the year, receive any on a personal benefit contract?				No No
b Did the foundation, during the year, pay premium  If 'Yes' to 6b, file Form 8870	is, directly or indirectly, o	n a personal benefit con	tract?	6b X
7 a At any time during the tax year, was the foundati	on a party to a prohibited	I tax shelter transaction?	· · · · · Yes X	No No
<b>b</b> If 'Yes,' did the foundation receive any proceeds				7 b
Part VIII Information About Officers, D and Contractors				Employees,
1 List all officers, directors, trustees, foundation				T. 1
(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
Donna G Brown	-			
c/o LKMI_127_University_Ave	Pres / Treas		_	_
Berkeley CA 94710	0.25	0.	0.	0.
Mark E Capizzi c/o LKMI 127 University Ave	Cogratary			
Berkeley CA 94710	Secretary 0.25	0.	0.	0.
Gabriel G Brown	0.23			<del>                                     </del>
c/o LKMI 127 University Ave	Director			
Berkeley CA 94710	0.25	0.	0.	0.
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1 – see ii	nstructions). If none, e	nter '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				
				1
Total number of other employees paid over \$50,000 .		<u> </u>	<u> </u> 	None

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None	
Total number of others receiving over \$50,000 for professional services	None
1 None	0
3	_
4	
	_
Part IX-B Summary of Program-Related Investments (see instructions)	<u> </u>
	Amount
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  1 None	Amount
1 None	_
2	0
<b>*</b>	
All other program-related investments See instructions	
3	_
	-
Total. Add lines 1 through 3	None
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Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. purposes 1 a 0. 1 b 7,848. **b** Average of monthly cash balances . . . . 1 c c Fair market value of all other assets (see instructions) . . . . . . 1 d 7,848. e Reduction claimed for blockage or other factors reported on lines 1a and 1c Acquisition indebtedness applicable to line 1 assets . . . . . . . . 2 3 7,848. Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)...... 118. Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4. 5 7,730. 6 387. Minimum investment return. Enter 5% of line 5 . . . . . . . . . . . . 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.) Minimum investment return from Part X. line 6 . . . . . 1 387. 2 a Tax on investment income for 2015 from Part VI, line 5 . .  ${f b}$  Income tax for 2015 (This does not include the tax from Part VI ) . 2 b 2 c 3 387. Distributable amount before adjustments Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions . . . . . 4 0. 5 387. 6 Deduction from distributable amount (see instructions) . . . . . 0. 7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 . . . . . 387. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes 1 a a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26 15,904. 1 b 0. Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes 2 0. 3 a 0. 3 Ь 0. 4 Qualifying distributions, Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4. 15,904. Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income 5 Enter 1% of Part I, line 27b (see instructions) . . . . . . . . . . 0. 15,904. 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

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### Part XIII Undistributed Income (see instructions)

	•	(a) Corpus	(b) Years prior to 2014	<b>(c)</b> 2014	<b>(d)</b> 2015
1	Distributable amount for 2015 from Part XI, line 7 · · · · · · · · · · · · · · · · · ·				387.
	Undistributed income, if any, as of the end of 2015			<u> </u>	
	Enter amount for 2014 only			0.	
3	P Total for prior years 20, 20, 20				
a	From 2010   0 .				
	From 2011 0 .				
	From 2012 0 .				
c	From 2013 9, 566.				
•	From 2014 12,827.				
f	Total of lines 3a through e	22,393.			
4	Qualifying distributions for 2015 from Part				
_	XII, line 4 \$ 15,904.			***	
a	Applied to 2014, but not more than line 2a	,		0.	
Ł	Applied to undistributed income of prior years (Election required — see instructions)				
c	Treated as distributions out of corpus (Election required — see instructions)				
	Applied to 2015 distributable amount				387.
	Remaining amount distributed out of corpus	15,517.			
5	Excess distributions carryover applied to 2015			C.W. Sasi	,
	(If an amount appears in column (d), the same amount must be shown in column (a))	i i á i i i			
	danie amodnie made de drown in colaini (a) )				
6	Enter the net total of each column as				
	indicated below:	****			
	a Corpus Add lines 3f, 4c, and 4e Subtract line 5	37,910.	* * * * *		
Ł	Prior years' undistributed income Subtract line 4b from line 2b		0.		
C	Enter the amount of prior years' undistributed			4	ì.i.fi
	income for which a notice of deficiency has been issued, or on which the section 4942(a)				
	tax has been previously assessed				
(	Subtract line 6c from line 6b Taxable				
	amount — see instructions	32 23 2	0.		
•	• Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount — see instructions			0.	
	Undistributed income for 2015 Subtract lines				
•	4d and 5 from line 1 This amount must be				
7	distributed in 2016				0.
•	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				
0	applied on line 5 or line 7 (see instructions)	0.			
9	Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	37,910.			
10	Analysis of line 9				
ā	Excess from 2011 0 .				
	P Excess from 2012 0 .				
	Excess from 2013 9,566.				
	Excess from 2014 12,827.				
e	Excess from 2015				

rm 990-PF (2015) Remy's Good Day I art*XIV   Private Operating Foundat	tions (see instru	ctions and Part	VII-A question	46-2070786	N/A
1 a If the foundation has received a ruling or dete	<del></del>		<del></del>	<del></del>	N/A
is effective for 2015, enter the date of the rule	ing	i		· · · · · · · · · •	
<b>b</b> Check box to indicate whether the foundation		ng foundation descr		4942(J)(3) or	4942(J)(5)
a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	<del></del>	
investment return from Part X for each year listed	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(e) Tota
<b>b</b> 85% of line 2a			<del> </del>	+	<del></del>
c Qualifying distributions from Part XII,	<del></del>		<del> </del>	+	<del></del>
line 4 for each year listed					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities					 
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
Complete 3a, b, or c for the alternative test relied upon.					
a 'Assets' alternative test — enter					
(1) Value of all assets	<b> </b>		}		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
art.XV Supplementary Information	(Complete this	part only if the	e foundation ha	ıd \$5,000 or more	e in
assets at any time during the Information Regarding Foundation Management	_ <del></del>	Structions.)			
a List any managers of the foundation who have close of any tax year (but only if they have co	ve contributed more	than 2% of the total \$5,000) (See sec	l contributions receivition 507(d)(2))	red by the foundation b	efore the
Donna G. Brown					
b List any managers of the foundation who ow	n 10% or more of the	e stock of a corpora	ition (or an equally la	arge portion of the own	ership of
a partnership or other entity) of which the for	indation has a 10% (	or greater interest			
None					
2 Information Regarding Contribution, Gran	nt. Gift. Loan, Schol	larship etc Progr	ams:	<del> </del>	
Check here X if the foundation only ma	akes contributions to	preselected charita	able organizations ai	nd does not accept uns ions under other condi	solicited tions,
requests for funds. If the foundation makes g	jiits, granis, etc (see	mod dottome, to me	3		
requests for funds. If the foundation makes g complete items 2a, b, c, and d		<u> </u>		be addressed	
requests for funds. If the foundation makes g		<u> </u>		d be addressed	
requests for funds. If the foundation makes g complete items 2a, b, c, and d		<u> </u>		d be addressed	
requests for funds. If the foundation makes g complete items 2a, b, c, and d		<u> </u>		d be addressed	
requests for funds If the foundation makes g complete items 2a, b, c, and d	or e-mail address of	the person to whon	n applications should	be addressed	
requests for funds If the foundation makes g complete items 2a, b, c, and d a The name, address, and telephone number of	or e-mail address of	the person to whon	n applications should	l be addressed	
requests for funds If the foundation makes goomplete items 2a, b, c, and d  a The name, address, and telephone number of the form in which applications should be sub-	or e-mail address of omitted and informat	the person to whon	n applications should		

Form 990-PF (2015) Remy's Good Day Fund

Part XV: Supplementary Information (continued)

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

Recipient   Silva price   Si	3 Grants and Contributions Pa	3 Grants and Contributions Paid During the Year or Approved for Future Payment										
Name and address (florms or business)   Substantal contributor   Subs				show any relationship to any status of		ruipose oi giant oi	Amount					
Annesty International 5 Penn Piaza, 16th Floor New York Doctors Without Borders P.O. 35x 5030 Hagerstown MD 21741 N/A Hagerstown MS Sutter Street, Suite 900 San Francisco CA 34108 N/A Food Bank for NY City 39 Broadway New York NY 10006 N/A PC General Support 1,200.  FC General Support 1,200.  General Support 1,200.  General Support 1,200.  FC General Support 1,200.  General Support 1,200.  General Support 1,200.		ousines	s)	substantial contributor	recipient							
S Penn Plaza, 16th Floor   New York   NY 10001 N/A   PC   General Support   2,400.	a Paid during the year											
New York	Amnesty International											
Doctors Without Borders   P.O. Box 5030     Hagerstown	5 Penn Plaza, 16th Flo	or										
R.O. Box 5030 Hagerstown MD 21741 N/A PC General Support 1,200.  Din Hau Foundation 450 Sutter Street, Suite 900 450 Sutter Street, Suite 900 Food Bank for NY City 39 Broadway New York NY 10006 N/A PC General Support 1,200.  Human Rights Watch 350 Fifth Avenue, 34th Floor New York NY 10118 N/A PC General Support 1,200.  Oxfam America 226 Causeway Street, 5th Floor Boston MA 02114 NA PC General Support 1,200.  UEW Foundation P.O. Sox 62  Keene CA 93531 NA PC General Support 1,200.  Food Bank for NUrre payment 1,200.  Food Bank for Nurre payment 1,200.  Approved for Nurre payment 9,600.  PC General Support 1,200.  9,600.	New York	NY	10001	N/A	PC	General Support	2,400.					
Hagestown MD 21741 N/A PC General Support 1,200. Dul Hau Foundation 450 Sutter Street, Suite 900 San Francisco CA 94108 N/A PC General Support 1,200. Focod Bank for NY City 39 Broadway New York NY 10006 N/A PC General Support 1,200. Human Rights Watch 350 Pifth Avenue, 34th Floor New York NY 10118 N/A PC General Support 1,200. Oxfam America 226 Causeway Street, 5th Floor Boston MA 02114 NA PC General Support 1,200. URW Foundation P.O. Box 62 Keene CA 93531 NA PC General Support 1,200. Dox 62 Keene CA 93531 NA PC General Support 1,200. Dox 64 NA PC General Support 1,200. Dox 65 NA PC General Support	Doctors Without Border	îs.										
Dul Hau Foundation	P.O. Box 5030											
### 450 Sutter Street, Suite 900 San Francisco	Hagerstown	MD	21741	N/A	PC	General Support	1,200.					
San Francisco   CA 94108 N/A   PC   General Support   1,200.	Duı Hau Foundatıon					]						
Food Bank for NY City 39 Broadway New York NY 10016 N/A Euman Rights Watch 350 Fith Avenue, 34th Floor New York NY 10118 N/A Oxfam America 226 Causeway Street, 5th Floor Boston HA 02114 NA PC General Support 1,200.  Total.  Total.  Total.  Total.  PApproved for fulure payment  PC General Support 1,200.  Seneral Support 1,200.  General Support 1,200.  General Support 1,200.  Food General Sup	450 Sutter Street, Sun	te 9	00									
39 Broadway New York NY 10006 N/A PC General Support 1,200. Human Rights Watch 350 Fifth Avenue, 34th Floor New York NY 10118 N/A PC General Support 1,200. Oxfam America 226 Causeway Street, 5th Floor Boston MA 02114 NA PC General Support 1,200. UTW Foundation P.O. Box 62 Keene CA 93531 NA PC General Support 1,200.	San Francisco	CA	94108	N/A	PC	General Support	1,200.					
New York	Food Bank for NY City											
Human Rights Watch 350 Fifth Avenue, 34th Floor New York NY 10118 N/A Oxfam America 226 Causeway Street, 5th Floor Boston MA 02114 UFW Foundation P.O. Box 62 Keene CA 93531 NA PC General Support 1,200.  Foundation PC General Support 1,200.  Foundation PC General Support 1,200.  Foundation PC General Support 1,200.	39 Broadway					}						
Human Rights Watch 350 Fifth Avenue, 34th Floor New York NY 10118 N/A Oxfam America 226 Causeway Street, 5th Floor Boston MA 02114 NA PC General Support 1,200.  General Support 1,200.  General Support 1,200.  General Support 1,200.  Formulation F	New York	NY	10006	N/A	PC	General Support	1,200.					
S50 Fifth Avenue, 34th Floor   New York   NY 10118   N/A   PC   General Support   1,200.	Human Rights Watch			j								
New York   NY 10118   N/A   PC   General Support   1,200.		n Flo	or									
Oxfam America 226 Causeway Street, 5th Floor Boston MA 02114 UFW Foundation P.O. Box 62 Keene CA 93531 NA PC General Support 1,200.  Total				N/A	PC	General Support	1,200.					
226 Causeway Street, 5th Floor   Boston							,					
## PC   General Support   1,200.    With Foundation   P.O. Box 62   Keene   CA   93531   NA   PC   General Support   1,200.    Total		ith F	loor									
UFW Foundation P.O. Box 62 Keene CA 93531 NA PC General Support 1,200.  Total				NA	PC	General Support	1.200.					
P.O. Box 62 Keene CA 93531 NA PC General Support 1,200.  Total			0212.			Concrete Support	2,200.					
Total												
Total > 3a 9,600.  b Approved for future payment		CA	93531	MA	PC	General Support	1 200					
b Approved for future payment	Recirc	Cii	JJJJ1			deneral suppore	1,200.					
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Part XVI-A	<b>Analysis</b>	of Income	e-Producing	Activities

Enter gross amounts unless otherwise indicated.		Unrelate	d business income	Excluded	by section 512, 513, or 514	(e)		
1	Program service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	( <b>d</b> ) Amount	Related or exempt function income (See instructions)		
a								
b								
C					<del></del>			
d								
e								
1								
_	Fees and contracts from government agencies							
2	Membership dues and assessments			1.4	1.			
3	Interest on savings and temporary cash investments Dividends and interest from securities			14				
4 5		4 . 11 1						
_	Debt-financed property	<u> </u>	See Co. 1	# # 1332.4	· s'\********	<u>. 6 73 2 </u>		
	Not debt-financed property				<u>-</u>			
_	Net rental income or (loss) from personal property	<u> </u>		-				
6 7	Other investment income							
8	Gain or (loss) from sales of assets other than inventory			-				
9	Net income or (loss) from special events							
10	Gross profit or (loss) from sales of inventory							
11	Other revenue	J 1982	4.4	· 10 · 10 · 10 · 10 · 10 · 10 · 10 · 10	, ,			
''a		** *** *** **	**	8	`	<u>                                      </u>		
b								
c								
d								
e								
12		å .			1.			
13	Total. Add line 12, columns (b), (d), and (e)					1.		
	worksheet in line 13 instructions to verify calculations							
			liaborant of Evens	- A D				
Par	t XVI-B Relationship of Activities to the	e Accomp	isnment of Exemp	pt Purp	oses			
	e No. Explain below how each activity for which inconsideration accomplishment of the foundation's exempt p	ome is report	ed in column (e) of Part	XVI-A co	ontributed importantly to	the		
	▼ accomplishment of the foundation's exempt p	urposes (oth	er than by providing fund	ds for suc	ch purposes) (See instru	uctions )		
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Form 990-PF (2015) Remy's Good Day Fund 46-2070786

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

de rel a Tr (1) (2) b Ot (1) (2) (3) (4)	scribed ating to ansfers () Cash () Othe her tra () Sale () Puro () Rent () Rent () Loar () Perfo	organization directly of in section 501(c) of opolitical organization of political organizations from the reporting of the control of the con	of the Code (other ons? foundation to a in the control of the cont	pt organization le exempt organization lessets	(c)(3) organ  npt organiza   tion  citations	tion of	r in section 527,		1 a (2) 1 b (1) 1 b (2) 1 b (3) 1 b (4) 1 b (5)	Yes	X X X X X X X
the	e aood	swer to any of the ab s, other assets, or s saction or sharing ar	ervices given by rangement, sho	the reporting found win column (d) the	dation If the value of th	e foundation e goods, c	on received less that other assets, or ser	an fair market value vices received	ın		
(a) Line	no	(b) Amount involved	(c) Name	of noncharitable exemp	t organization	(	(d) Description of trans	sfers, transactions, and	sharing arran	gement	S
				<u>.</u>							
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de	scribe	undation directly or in d in section 501(c) on complete the following	of the Code (other	ed with, or related to er than section 501	o, one or mo (c)(3)) or in	ore tax-exe section 52	empt organizations 279		[]Ye	X	No
	(a)	Name of organizati	on	(b) Type o	of organizat	ion	(c	) Description of rela	tionship		
		· · · · · · · · · · · · · · · · · · ·		1	·		<u> </u>	_			
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		<u>-</u>		<u> </u>		<del></del>					
	11-4	enalties of perjury, i declar	e that I have everyor	d this seture, including or		hadular and	statements, and to the he	act of my knowledge and h	oliof it in true		
Sign Here	correct.	and complete Declaration	of preparer (other that	an taxpayer) is based on a	all information of	which prepa	arer has any knowledge	ast of my knowledge and a	May the this retur	n with th	e
	<u></u>	1.5	~ V"	1, 2, 6	0 7	• 11	<u>President</u>		(see inst	uctions)	2
	Signa	ture of officer or trustee	-		Date		Title		:	Yes	No
		Print/Type preparer's nar	me	Preparer's ug	nature	,	Date	Checkif	PTIN		
Paid		Dion L Grif	fin, CPA	<u> </u>	my	<u>~</u>	9/14/16	self-employed	P0188	2984	
Prepa	rer	Firm s name	Leventhal	/Kline Manac	gement	Inc.		Firm's EIN ► 94-3	292172		
Use O		-		rsity Avenue						-	
530 0	···· <del>y</del>	_	Berkeley			CA 9	94710	Phone no (510	841-	4123	) 1
BAA		- <del></del>					<del></del>		Form 99		

#### Schedule B

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

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

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

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

OMB No 1545-0047

2015

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of the organization		Employer identification number		
Remy's Good Day Fund 46-2070786				
Organization type (check one)				
Filers of:	Section:			
Form 990 or 990-EZ	501(c)( ) (enter number) organization			
	vate foundation			
527 political organization				
Form 990-PF	X 501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable trust treated as a private	foundation		
	501(c)(3) taxable private foundation			
Check if your organization is covered by the Gene	eral Rule or a Special Rule.			
Note. Only a section 501(c)(7), (8), or (10) organi	zation can check boxes for both the General Rule and a Specia	I Rule See instructions		
General Rule				
X For an organization filing Form 990, 990-EZ, property) from any one contributor. Complete	or 990-PF that received, during the year, contributions totaling \$ Parts I and II See instructions for determining a contributor's to	5,000 or more (in money or ital contributions.		
Special Rules				
For an organization described in section 501( under sections 509(a)(1) and 170(b)(1)(A)(vi)	c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support te, that checked Schedule A (Form 990 or 990-EZ), Part II, line 13 year, total contributions of the greater of (1) \$5,000 or (2) 2% or EZ, line 1 Complete Parts I and II	3, 16a, or 16b, and that		
during the year, total contributions of more that	c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a an \$1,000 exclusively for religious, charitable, scientific, literary, hildren or animals Complete Parts I, II, and III	ny one contributor, or educational		
during the year, contributions exclusively for r \$1,000 If this box is checked, enter here the charitable, etc., purpose Do not complete an	c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a religious, charitable, etc., purposes, but no such contributions to total contributions that were received during the year for an exc. y of the parts unless the <b>General Rule</b> applies to this organization, etc., contributions totaling \$5,000 or more during the year	taled more than <i>lusively</i> religious,		
Caution. An organization that is not covered by the 990-PF), but it must answer 'No' on Part IV, line 2	ne General Rule and/or the Special Rules does not file Schedul 2, of its Form 990, or check the box on line H of its Form 990-EZ ing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	Z or on its Form 990-PF,		

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

	B (Form 990, 990-EZ, or 990-PF) (2015)	Page	1 of 1 of <b>Part</b>
Name of org	anization  s Good Day Fund		r identification number
Part	Contributors (see instructions) Use duplicate copies of Part I if additional space	<del></del>	070700
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Donna G. Brown	-	Person X
	127 University Avenue	\$ <u>10,000</u> .	Noncash
	Berkeley CA 94710	-	(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	The Alvin & Peggy Brown Fam. Char. Foundation	_	Person X
	8180 Wisconsın Avenue	\$ <u>10,000</u> .	Payroll Noncash
	Bethesda MD 20814-3633	-	(Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		-  \$\$	Person Payroll Noncash
		_	(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		-  \$\$	Person Payroll Noncash Complete Part II for
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	Person Payroll Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	Person Payroll Noncash
	<u> </u>		(Complete Part II for noncash contributions )
54.6		0 1 1 1 D /F 5	

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
Bank Service Charges	99.			99.
Filing Fees	35.			35.
Postage & Delivery	97.			97.

Total <u>231.</u> \_\_\_\_\_\_

Form 990-PF, Page 4, Part VII-A, Line 8a States Registered In

NV - Nevada
CA - California

Form 990-PF, Page 1, Part I Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Leventhal Kline Management	Tax Preparation	2,775.			2,775.

Total <u>2,775.</u> <u>2,775.</u>

Form 990-PF, Page 1, Part I

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Leventhal Kline Management Inc GLK Registered Agents	Foundation administration Registration	2,331. 99.			3,199.

Total <u>2,430.</u> <u>3,298.</u>