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For calendar year 2015, or tax year beginning 01-01-2015 , and ending 12-31-2015

Name of foundation THE YARDI FOUNDATION		A Employer identification number 46-4356177	
Number and street (or P O box number if mail is not delivered to street address) 104 W ANAPAMU STREET SUITE B		Room/suite	B Telephone number (see instructions) (805) 699-2040
City or town, state or province, country, and ZIP or foreign postal code SANTA BARBARA, CA 93101		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 4,989,025		J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	

Part I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	2,137,000			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV , line 2)		0		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	2,137,000	0		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule).	495	0		0
	b Accounting fees (attach schedule).				
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	160	0		0
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings.				
	22 Printing and publications				
	23 Other expenses (attach schedule).	360	0		0
	24 Total operating and administrative expenses. Add lines 13 through 23	1,015	0		0
	25 Contributions, gifts, grants paid	973,380			973,380
	26 Total expenses and disbursements. Add lines 24 and 25	974,395	0		973,380
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	1,162,605			
	b Net investment income (if negative, enter -0-)		0		
	c Adjusted net income (if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing	2,231,244	3,202,025	3,202,025
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ 1,787,000 Less allowance for doubtful accounts ▶ _____	1,600,000	1,787,000	1,787,000
	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 ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	15	Other assets (describe ▶ _____)			
	16	Total assets(to be completed by all filers—see the instructions Also, see page 1, item I)	3,831,244	4,989,025	4,989,025
Liabilities	17	Accounts payable and accrued expenses	4,824		
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule).			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities(add lines 17 through 22)	4,824	0	
Net Assets or Fund Balances		Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24	Unrestricted	3,826,420	4,989,025	
	25	Temporarily restricted			
	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	Total net assets or fund balances(see instructions)	3,826,420	4,989,025	
	31	Total liabilities and net assets/fund balances(see instructions)	3,831,244	4,989,025	

Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	3,826,420
2	Enter amount from Part I, line 27a	2	1,162,605
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	4,989,025
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	4,989,025

Part IV Capital Gains and Losses for Tax on Investment Income

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)		How acquired P—Purchase (b) D—Donation	Date acquired (c) (mo , day, yr)	Date sold (d) (mo , day, yr)
1a				
b				
c				
d				
e				

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
a			
b			
c			
d			
e			

2	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	2	
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	

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

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)
If section 4940(d)(2) applies, leave this part blank

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

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014	0	1,925,243	0 000000
2013	0	0	0 000000
2012			
2011			
2010			


2	Total of line 1, column (d).	2	0 000000
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 000000
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	4	3,560,055
5	Multiply line 4 by line 3.	5	0
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	0
7	Add lines 5 and 6.	7	0
8	Enter qualifying distributions from Part XII, line 4.	8	973,380

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

Part VI **Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)**

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> 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 here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	0
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of 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	0
3	Add lines 1 and 2.	3	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-	5	0
6	Credits/Payments		
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868).	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	0
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	0
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . . . ▶	10	
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ Refunded ▶	11	

Part VII-A **Statements Regarding Activities**

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		Yes	No
1a				No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>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</i>	1b		No
c	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ _____ 0 (2) On foundation managers ▶ \$ _____ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2		No
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? <i>If "Yes," attach a conformed copy of the changes</i>	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ 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? <i>If "No," attach explanation</i> .	8b	Yes	
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)? <i>If "Yes," complete Part XIV</i>	9		No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> 	10	Yes	

Part 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 meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ N/A	13	Yes	
14	The books are in care of ▶ THE YARDI FOUNDATION Telephone no ▶ (805) 699-2040 Located at ▶ 430 S FAIRVIEW AVE GOLETA CA ZIP+4 ▶ 93117			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year ▶ 15	15		
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ▶	16	Yes No	No No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here. ▶ <input type="checkbox"/>	1b		
c	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?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
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 all years listed, answer "No" and attach statement—see instructions).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	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		No
b	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		No

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

5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions).	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?		5b	
	Organizations relying on a current notice regarding disaster assistance check here. ▶	<input type="checkbox"/>		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b	No
	<i>If "Yes" to 6b, file Form 8870</i>			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		7b	

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

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
ANANT YARDI 430 S FAIRVIEW AVE GOLETA, CA 93117	DIRECTOR AND PRESIDENT/CEO 0 50	0	0	0
JASON YARDI 430 S FAIRVIEW AVE GOLETA, CA 93117	DIRECTOR AND CFO 0 50	0	0	0
GORDON MORRELL 430 S FAIRVIEW AVE GOLETA, CA 93117	DIRECTOR AND SECRETARY 0 50	0	0	0
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
NONE				
Total number of other employees paid over \$50,000. ▶				0

Part VIII

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

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services. 0

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0

Part X Minimum Investment Return

(All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	0
b	Average of monthly cash balances.	1b	3,614,269
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	3,614,269
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	3,614,269
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	54,214
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3,560,055
6	Minimum investment return. Enter 5% of line 5.	6	178,003

Part XI Distributable Amount
 (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	178,003
2a	Tax on investment income for 2015 from Part VI, line 5.	2a	
b	Income tax for 2015 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	0
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	178,003
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	178,003
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	178,003

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	973,380
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	973,380
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions).	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	973,380

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

Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				178,003
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only.			96,262	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2015				
a From 2010.				
b From 2011.				
c From 2012.				
d From 2013.				
e From 2014.				
f Total of lines 3a through e.	0			
4 Qualifying distributions for 2015 from Part XII, line 4 ► \$ 973,380				
a Applied to 2014, but not more than line 2a			96,262	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2015 distributable amount.				178,003
e Remaining amount distributed out of corpus	699,115			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	699,115			
b Prior years' undistributed income Subtract line 4b from line 2b.		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions). . .	0			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	699,115			
10 Analysis of line 9				
a Excess from 2011. . . .				
b Excess from 2012. . . .				
c Excess from 2013. . . .				
d Excess from 2014. . . .				
e Excess from 2015. . . .	699,115			

Part XIV

b Check box to indicate whether the organization is a:

Tax year	Prior 3 years			(e) Total
(a) 2015	(b) 2014	(c) 2013	(d) 2012	

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Part XV

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or email address of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

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

Part XV

Supplementary Information(continued)

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<div>a Paid during the year</div> <div>See Additional Data Table</div>				
<div>Total</div>			<div>▶ 3a</div>	973,380
<div>b Approved for future payment</div>				
<div>Total</div>			<div>▶ 3b</div>	0

Enter gross amounts unless otherwise indicated

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2015)

Part XVII


1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash.	1a(1)		No
(2) Other assets.	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization.	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.	1b(2)		No
(3) Rental of facilities, equipment, or other assets.	1b(3)		No
(4) Reimbursement arrangements.	1b(4)		No
(5) Loans or loan guarantees.	1b(5)		No
(6) Performance of services or membership or fundraising solicitations.	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	1c		No
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received			

[illegible]




2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes
☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here 	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge				
	***** _____ Signature of officer or trustee		2016-11-15 _____ Date	***** _____ Title	

May the IRS discuss this return with the preparer shown below
 (see instr)? ☒ Yes ☐ No

Paid Preparer Use Only	Print/Type preparer's name LAWRENCE W BROWN	Preparer's Signature 	Date 	Check if self-employed <input checked="" type="checkbox"/>	PTIN P00540511
	Firm's name  NASIF HICKS HARRIS & CO LLP			Firm's EIN  77-0181453	
	Firm's address  104 WEST ANAPAMU STREET SUITE B SANTA BARBARA, CA 93101			Phone no (805) 966-1521	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
A DIFFERENT POINT OF VIEW PO BOX 6562 SANTA BARBARA,CA 93160	N/A	PUBLIC CHARITY	AVIATION CAREER PROGRAM	5,000
ACADEMY OF HEALING ARTS 1209 DE LA VINA ST STE A SANTA BARBARA,CA 93101	N/A	PUBLIC CHARITY	TEENAGER EDUCATIONAL PROGRAM	10,000
ALZHEIMERS ASSOCIATION 1528 CHAPALA ST STE 204 SANTA BARBARA,CA 93101	N/A	PUBLIC CHARITY	ALZHEIMER'S FAMILY SERVICES PROGRAM	15,000
AMERICAN HEART ASSOCIATION 212 W FIGUEROA ST SANTA BARBARA,CA 93101	N/A	PUBLIC CHARITY	CARDIOVASCULAR DISEASES AND STROKE RESEARCH	10,000
BERT'S BIG ADVENTURE PO BOX 420917 ATLANTA,GA 30342	N/A	PUBLIC CHARITY	SERVICES FOR CHILDREN WITH CHRONIC AND TERMINAL ILLNESS	5,000
BIG BROTHERS BIG SISTERS OF THE TRIANGLE 808 AVIATION PKWY SUITE 900 MORRISVILLE,NC 27560	N/A	PUBLIC CHARITY	AT-RISK CHILDREN SUPPORT	10,000
BOYS & GIRLS CLUB OF GOLETA 1035 STATE ST SANTA BARBARA,CA 93101	N/A	PUBLIC CHARITY	CHILD AND YOUTH DEVELOPMENT	5,000
BOYS & GIRLS CLUB OF CLEVELAND 6114 BROADWAY AVE CLEVELAND,OH 44127	N/A	PUBLIC CHARITY	CHILD AND YOUTH DEVELOPMENT	10,000
CHILD ABUSE LISTENING MEDIATION 1236 CHAPALA ST SANTA BARBARA,CA 93101	N/A	PUBLIC CHARITY	ASSESS AND TREAT CHILD ABUSE	30,000
CAMP TWIN LAKES ATLANTA 600 MEANS ST SUITE 110 ATLANTA,GA 30318	N/A	PUBLIC CHARITY	CAMP EXPERIENCES FOR CHILDREN WITH SERIOUS ILLNESSES, DISABILITIES AND OTHER LIFE CHALLENGES	15,000
CARPINTERIA VALLEY ARTS COUNCIL PO BOX 597 CARPINTERIA,CA 93014	N/A	PUBLIC CHARITY	PROMOTE AND SUPPORT THE ARTS	5,500
COURT APPOINTED SPECIAL ADVOCATES 118 EAST FIGUEROA STREET SANTA BARBARA,CA 93101	N/A	PUBLIC CHARITY	SUPPORT FOR ABUSED AND NEGLECTED CHILDREN	25,000
CASA SERENA 1515 BATH ST SANTA BARBARA,CA 93101	N/A	PUBLIC CHARITY	SUPPORT FOR WOMEN WITH ALCOHOLISM	5,000
CHILD CRISIS ARIZONA 2334 E POLK ST PHOENIX,AZ 85006	N/A	PUBLIC CHARITY	SUPPORT FOR ABUSED AND NEGLECTED CHILDREN	10,000
CHILDREN'S CREATIVE PROJECT 3970 LA COLINA RD 9 SANTA BARBARA,CA 93110	N/A	PUBLIC CHARITY	PROVIDE ARTS PROGRAM FOR CHILDREN	6,000
Total ▶ 3a				973,380

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
COMMUNITY COUNSELING & EDUCATION CENTER 923 OLIVE STREET STE 1 SANTA BARBARA,CA 93101	N/A	PUBLIC CHARITY	COUNSELING SERVICES	5,000
COMMUNITY ENVIRONMENTAL COUNCIL 26 WANAPAMU ST 2ND FLOOR SANTA BARBARA,CA 93101	N/A	PUBLIC CHARITY	ENVIRONMENTAL ENERGY EFFICIENCY	10,000
CALIFORNIA STATE UNIVERSITY CHANNEL ISLANDS FOUNDATION 1 UNIVERSITY DR CAMARILLO,CA 93012	N/A	GOVERMENTAL ORGANIZA	EDUCATIONAL SUPPORT	25,000
CENTER FOR URBAN AGRICULTURE AT FAIRVIEW GARDENS 598 N FAIRVIEW AVE SANTA BARBARA,CA 93117	N/A	PUBLIC CHARITY	SMALL SCALE URBAN AGRICULTURE AND EDUCATION	15,000
DIRECT RELIEF INTERNATIONAL 27 S LA PATERA LANE SANTA BARBARA,CA 93117	N/A	PUBLIC CHARITY	MEDICAL SUPPORT	10,000
DOMESTIC VIOLENCE SOLUTIONS PO BOX 1536 SANTA BARBARA,CA 93102	N/A	PUBLIC CHARITY	DOMESTIC VIOLENCE INTERVENTION AND PREVENTION	25,000
DREAMS COME TRUE 6803 SOUTH POINT PARKWAY JACKSONVILLE,FL 32202	N/A	PUBLIC CHARITY	SUPPORT FOR CHILDREN WITH LIFE-THREATENING ILLNESS	5,000
EASY LIFT TRANSPORTATION 53 CASS PL STE D GOLETA,CA 93117	N/A	PUBLIC CHARITY	PROVIDE TRANSPORTATION TO SENIOR CITIZENS AND PEOPLE WITH DISABILITIES	8,000
ENVIRONMENTAL DEFENSE CENTER 906 GARDEN STREET SANTA BARBARA,CA 93101	N/A	PUBLIC CHARITY	LOCAL ENVIRONMENT PROTECTION	16,480
EXPLORE ECOLOGY 302 E COTA ST SANTA BARBARA,CA 93101	N/A	PUBLIC CHARITY	ENVIROMENTAL EDUCATION	5,000
FAMILY SERVICES AGENCY 123 W GUTIERREZ ST SANTA BARBARA,CA 93101	N/A	PUBLIC CHARITY	PROVIDE SOCIAL SERVICES	25,000
FOODBANK OF CENTRAL & EASTERN NORTH CAROLINA 3808 TARHEEL DR RALEIGH,NC 27609	N/A	PUBLIC CHARITY	HUNGER PREVENTION	25,000
FOODBANK OF SANTA BARBARA COUNTY 1525 STATE ST SUITE 100 SANTA BARBARA,CA 93101	N/A	PUBLIC CHARITY	HUNGER PREVENTION	25,000
FOUNDATION OF HOPE 9401 GLENWOOD AVE RALEIGH,NC 27617	N/A	PUBLIC CHARITY	MENTAL ILLNESS RESEARCH AND TREATMENT	10,000
GIRLS INC PO BOX 236 SANTA BARBARA,CA 93102	N/A	PUBLIC CHARITY	YOUNG GIRL SUPPORT PROGRAM	40,000
Total ▶ 3a				973,380

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
GIRLS INC CARPINTERIA 5315 FOOTHILL RD CARPINTERIA,CA 93013	N/A	PUBLIC CHARITY	YOUNG GIRL SUPPORT PROGRAM	5,000
GREATER CLEVELAND FOODBANK 15500 S WATERLOO RD CLEVELAND,OH 44110	N/A	PUBLIC CHARITY	HUNGER PREVENTION	12,500
HABITAT FOR HUMANITY PO BOX 176 GOLETA,CA 93116	N/A	PUBLIC CHARITY	PROVIDES HOMES FOR THOSE IN NEED	25,000
HEARTS THERAPEUTIC PO BOX 30662 SANTA BARBARA,CA 93130	N/A	PUBLIC CHARITY	EQUINE ASSISTED THERAPY ACTIVITIES	10,000
HILLSIDE HOUSE 1235 VERONICA SPRINGS RD SANTA BARBARA,CA 93102	N/A	PUBLIC CHARITY	PROVIDE SUPPORT FOR PEOPLE WITH DISABILITIES	5,000
HOSPICE OF SANTA BARBARA 2050 ALAMEDA PADRE SERRA STE 100 SANTA BARBARA,CA 93103	N/A	PUBLIC CHARITY	END OF LIFE CARE	15,000
ISLAND HARVEST FOOD BANK FOR LONG ISLAND 40 MARCUS BLVD HAUPPAUGE,NY 11788	N/A	PUBLIC CHARITY	HUNGER PREVENTION	10,000
JUNIOR LEAGUE OF LONG ISLAND 116 EUSTON RD GARDEN CITY,NY 11530	N/A	PUBLIC CHARITY	SUPPORT FOR CHILDREN WITH ILLNESSES	2,500
KCLU RADIO 60 WOLSEN RD 4400 THOUSAND OAKS,CA 91360	N/A	PUBLIC CHARITY	PUBLIC BROADCASTING	33,000
MAKE A WISH FOUNDATION - ATLANTA 1775 THE EXCHANGE SE STE 200 ATLANTA,GA 30339	N/A	PUBLIC CHARITY	SUPPORT FOR CHILDREN WITH LIFE-THREATENING ILLNESS	10,000
MASS ADOPTION RESOURCE EXCHANGE 45 FRANKLIN ST 5TH FLOOR BOSTON,MA 02110	N/A	PUBLIC CHARITY	ADOPTION AND FOSTER SERVICES FOR SPECIAL NEEDS CHILDREN	10,000
NATIONAL AFFORDABLE HOUSING MANAGEMENT EDUCATION FOUNDATION 133 EAST DE LA GUERRA PMB 315 SANTA BARBARA,CA 93101	N/A	PUBLIC CHARITY	AFFORDABLE HOUSING ADVOCATION	16,000
NORTH TEXAS FOOD BANK 4500 S COCKRELL HILL ROAD DALLAS,TX 75236	N/A	PUBLIC CHARITY	HUNGER PREVENTION	10,000
PATHPOINT (WORK TRAINING PROGRAM) 315 W HALEY ST STE 103 SASNTA BARBARA,CA 93101	N/A	PUBLIC CHARITY	FAMILY PLANNING AND REPRODUCTIVE HEALTH	20,000
PEOPLES SELF HELP HOUSING 26 E VICTORA ST SANTA BARBARA,CA 93101	N/A	PUBLIC CHARITY	PROVIDE AFFORDABLE HOUSING	20,000
Total ► 3a				973,380

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PHIPPS COMMUNITY DEV CORP OF NYC 902 BROADWAY NEW YORK, NY 10010	N/A	PUBLIC CHARITY	PROVIDE AFFORDABLE HOUSING	20,000
PXE INTERNATIONAL 4301 CONNETICUIT AVE STE 104 WASHINGTON, DC 02008	N/A	PUBLIC CHARITY	PSEUDOXANTHOMA ELASTICUM RESEARCH	25,000
REACH OUT AND READ NATIONAL CENTER 56 ROLAND ST SUITE 100D BOSTON, MA 02129	N/A	PUBLIC CHARITY	YOUNG CHILD DEVELOPMENT	10,000
SANSUM DIABETES RESEARCH INSTITUTE 2219 BATH STREET SANTA BARBARA, CA 93105	N/A	PUBLIC CHARITY	DIABETES RESEARCH, EDUCATION AND CARE	10,000
SANTA BARBARA BICYCLE COALITION PO BOX 92047 SANTA BARBARA, CA 93190	N/A	PUBLIC CHARITY	LOCAL BYCYCLING SUPPORT AND ADVOCATION	5,000
SANTA BARBARA CHANNEL KEEPER 714 BOND AVE SATNA BARBARA, CA 93103	N/A	PUBLIC CHARITY	ENVIRONMENTAL AND WILDLIFE PROTECTION	2,500
SANTA BARBARA POLICE ACTIVITIES LEAGUE PO BOX 91121 SANTA BARBARA, CA 93190	N/A	PUBLIC CHARITY	TEENAGER EDUCATIONAL PROGRAM	5,000
SANTA BARBARA RAPE CRISIS CENTER 433 E CANON PERDIDO SANTA BARBARA, CA 93101	N/A	PUBLIC CHARITY	CRISIS SUPPORT	30,000
SANTA BARBARA YOUTH SYMPHONY 1330 STATE ST STE 102 SANTA BARBARA, CA 93101	N/A	PUBLIC CHARITY	YOUTH MUSICAL PROGRAM	5,000
SANTA BARBARA COMMUNITY COLLEGE FOUNDATION 721 CLIFF DRIVE SANTA BARBARA, CA 93109	N/A	GOVERMENTAL ORGANIZA	COLLEGE SCHOLARSHIP PROGRAM	30,000
SCHOLARSHIP FOUNDATION OF SANTA BARBARA PO BOX 3620 SANTA BARBARA, CA 93101	N/A	PUBLIC CHARITY	COLLEGE, GRADUATE AND VOCATIONAL SCHOLARSHIP PROGRAM	20,000
SEE INTERNATIONAL 5638 HOLLISTER BLVD STE 210 SANTA BARBARA, CA 93117	N/A	PUBLIC CHARITY	HELP THE SICK	11,400
SPECIAL OLYMPICS OF SANTA BARBARA 423 W VICTORIA SANTA BARBARA, CA 93101	N/A	PUBLIC CHARITY	SPORTS PROGRAMS FOR PEOPLE WITH DISABILITIES	9,500
ST VINCENT AFTERSCHOOL PROGRAM 4200 CALLE REAL SANTA BARBARA, CA 93110	N/A	PUBLIC CHARITY	PROVIDE AFFORDABLE HOUSING	5,000
STORY TELLER 2115 STATE STREET SANTA BARBARA, CA 93105	N/A	PUBLIC CHARITY	HOMELESS AND AT-RISK EDUCATIONAL PROGRAMS	20,000
Total ▶ 3a				973,380

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
STORYCORPS 80 HANSON PL 2ND FLOOR NEW YORK,NY 11217	N/A	PUBLIC CHARITY	RECORD, PRESERVE, AND SHARE THE STORIES OF AMERICANS FROM ALL BACKGROUNDS AND BELIEFS	10,000
TEDDY BEAR CANCER FOUNDATION 133 E DE LA GUERRA ST STE 163 SANTA BARBARA,CA 93101	N/A	PUBLIC CHARITY	CHILD CANCER RESEARCH AND CARE	10,000
THE COUNCIL ON ALCOHOLISM AND DRUG ABUSE PO BOX 28 SANTA BARBARA,CA 93102	N/A	PUBLIC CHARITY	ALCOHOL ABUSE PREVENTION AND TREATMENT	10,000
THE MAIN PLACE 129 S MAIN PLACE IRVING,TX 75060	N/A	PUBLIC CHARITY	MENTAL HEALTH RECOVERY	5,000
TRANSITION HOUSE 425 EAST COTA STREET SANTA BARBARA,CA 93101	N/A	PUBLIC CHARITY	SHELTER AND ANTI-POVERTY SERVICES	30,000
UNIVERSITY OF CALIFORNIA SANTA BARBARA ARTS & LECTURES UNIVERSITY OF CALIFORNIA SANTA BARBARA SANTA BARBARA,CA 93106	N/A	PUBLIC CHARITY	FAMILY HOMELESSNESS PREVENTION	25,000
VALLEY HAVEN 502 N THIRD ST LOMPC,CA 93464	N/A	PUBLIC CHARITY	PROMOTE AND SUPPORT THE ARTS	10,000
WILDERNESS YOUTH PROJECT 5386 HOLLISTER AVE SUITE D SANTA BARBARA,CA 93111	N/A	PUBLIC CHARITY	CHILD DEVELOPMENT	10,000
WOMENS ECONOMIC VENTURES 333 S SALINA ST SANTA BARBARA,CA 93103	N/A	PUBLIC CHARITY	SMALL BUSINESS EDUCATION AND SUPPORT	10,000
YOUTH MAKING CHANGE 26 W ANAPAMU ST SANTA BARBARA,CA 93101	N/A	PUBLIC CHARITY	ORGANIZED PHILANTHROPY FOR YOUTH	25,000
Total ▶ 3a				973,380

TY 2015 Legal Fees Schedule**Name:** THE YARDI FOUNDATION**EIN:** 46-4356177

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	495	0		0

TY 2015 Other Expenses Schedule**Name:** THE YARDI FOUNDATION**EIN:** 46-4356177

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK FEES	360	0		0

TY 2015 Substantial Contributors Schedule

Name: THE YARDI FOUNDATION

EIN: 46-4356177

Name	Address
YARDI SYSTEMS INC	430 S FAIRVIEW AVE GOLETA, CA 93117
ANANT EILEEN YARDI	1721 HILLCREST ROAD SANTA BARBARA, CA 93103

TY 2015 Taxes Schedule**Name:** THE YARDI FOUNDATION**EIN:** 46-4356177

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
STATE TAXES	160	0		0

Schedule B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 990-PF

▶ 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 THE YARDI FOUNDATION	Employer identification number 46-4356177
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Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% 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 THE YARDI FOUNDATION	Employer identification number 46-4356177
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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	YARDI SYSTEMS INC	\$ 1,787,000	Person <input checked="" type="checkbox"/>
	430 S FAIRVIEW AVE		Payroll <input type="checkbox"/>
	GOLETA, CA 93117		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
2	ANANT AND EILEEN YARDI	\$ 350,000	Person <input checked="" type="checkbox"/>
	1721 HILLCREST ROAD		Payroll <input type="checkbox"/>
	SANTA BARBARA, CA 93103		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization THE YARDI FOUNDATION	Employer identification number 46-4356177
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div> <div>--</div>	<div></div> <div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div> <div>--</div>	<div></div> <div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
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