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Form **990-PF**

Department of the Treasury  
Internal Revenue Service

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

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OMB No 1545-0052

**2015**

**Open to Public Inspection**

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

Name of foundation THE LOREEN ARBUS FOUNDATION		<b>A Employer identification number</b> 75-3126107
Number and street (or P O box number if mail is not delivered to street address) Room/suite 8383 WILSHIRE BLVD SUITE 240		<b>B Telephone number (see instructions)</b> (323) 658-5477
City or town, state or province, country, and ZIP or foreign postal code BEVERLY HILLS, CA 90211		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>
<b>G</b> 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		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) <b>\$</b> 53,702	<b>J</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)	<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

<b>Part I Analysis of Revenue and Expenses</b> <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		Revenue and expenses per books <b>(a)</b>	Net investment income <b>(b)</b>	Adjusted net income <b>(c)</b>	Disbursements for charitable purposes <b>(d)</b> (cash basis only)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc., received (attach schedule) . . . . .	690,000			
	<b>2</b> Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	<b>3</b> Interest on savings and temporary cash investments . . . . .	18	18		
	<b>4</b> Dividends and interest from securities . . . . .				
	<b>5a</b> Gross rents . . . . .				
	<b>b</b> Net rental income or (loss) _____				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10 _____				
	<b>b</b> Gross sales price for all assets on line 6a _____				
	<b>7</b> Capital gain net income (from Part IV, line 2) . . . . .		0		
	<b>8</b> Net short-term capital gain . . . . .				
	<b>9</b> Income modifications . . . . .				
	<b>10a</b> Gross sales less returns and allowances _____				
<b>b</b> Less Cost of goods sold . . . . .					
<b>c</b> Gross profit or (loss) (attach schedule) . . . . .					
<b>11</b> Other income (attach schedule) . . . . .					
<b>12 Total.</b> Add lines 1 through 11 . . . . .	690,018	18			
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc . . . . .	0	0		0
	<b>14</b> Other employee salaries and wages . . . . .	33,931	0		33,931
	<b>15</b> Pension plans, employee benefits . . . . .				
	<b>16a</b> Legal fees (attach schedule). . . . .	2,191	0		2,191
	<b>b</b> Accounting fees (attach schedule). . . . .	71,818	0		71,818
	<b>c</b> Other professional fees (attach schedule) . . . . .	24,350	0		8,750
	<b>17</b> Interest . . . . .				
	<b>18</b> Taxes (attach schedule) (see instructions) . . . . .	3,869	0		3,869
	<b>19</b> Depreciation (attach schedule) and depletion . . . . .	2,746	0		
	<b>20</b> Occupancy . . . . .				
	<b>21</b> Travel, conferences, and meetings. . . . .				
	<b>22</b> Printing and publications . . . . .				
	<b>23</b> Other expenses (attach schedule). . . . .	23,371	0		23,369
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23 . . . . .	162,276	0		143,928
	<b>25</b> Contributions, gifts, grants paid . . . . .	607,971			607,971
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25 . . . . .	770,247	0		751,899	
<b>27</b> Subtract line 26 from line 12 . . . . .					
<b>a Excess of revenue over expenses and disbursements</b>	-80,229				
<b>b Net investment income</b> (if negative, enter -0-)		18			
<b>c Adjusted net income</b> (if negative, enter -0-)					

<b>Part II Balance Sheets</b>		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		
<b>Assets</b>	<b>1</b>	Cash—non-interest-bearing . . . . .				
	<b>2</b>	Savings and temporary cash investments . . . . .	125,098	47,903	47,903	
	<b>3</b>	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____				
	<b>4</b>	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____				
	<b>5</b>	Grants receivable . . . . .				
	<b>6</b>	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions). . . . .				
	<b>7</b>	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____				
	<b>8</b>	Inventories for sale or use . . . . .				
	<b>9</b>	Prepaid expenses and deferred charges . . . . .	938	938	938	
	<b>10a</b>	Investments—U S and state government obligations (attach schedule)				
	<b>b</b>	Investments—corporate stock (attach schedule) . . . . .				
	<b>c</b>	Investments—corporate bonds (attach schedule) . . . . .				
	<b>11</b>	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____				
	<b>12</b>	Investments—mortgage loans. . . . .				
	<b>13</b>	Investments—other (attach schedule) . . . . .				
	<b>14</b>	Land, buildings, and equipment basis ▶ _____ 14,981 Less accumulated depreciation (attach schedule) ▶ 10,120	7,607	4,861	4,861	
<b>15</b>	Other assets (describe ▶ _____)					
<b>16</b>	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	133,643	53,702	53,702		
<b>Liabilities</b>	<b>17</b>	Accounts payable and accrued expenses . . . . .	154	442		
	<b>18</b>	Grants payable . . . . .				
	<b>19</b>	Deferred revenue . . . . .				
	<b>20</b>	Loans from officers, directors, trustees, and other disqualified persons				
	<b>21</b>	Mortgages and other notes payable (attach schedule). . . . .				
	<b>22</b>	Other liabilities (describe ▶ _____)				
	<b>23</b>	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	154	442		
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here</b> ▶ <input type="checkbox"/>			<b>and complete lines 24 through 26 and lines 30 and 31.</b>		
	<b>24</b>	Unrestricted . . . . .				
	<b>25</b>	Temporarily restricted . . . . .				
	<b>26</b>	Permanently restricted . . . . .				
	<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/>			<b>and complete lines 27 through 31.</b>		
	<b>27</b>	Capital stock, trust principal, or current funds . . . . .	0	0		
	<b>28</b>	Paid-in or capital surplus, or land, bldg, and equipment fund	0	0		
	<b>29</b>	Retained earnings, accumulated income, endowment, or other funds	133,489	53,260		
	<b>30</b>	<b>Total net assets or fund balances</b> (see instructions) . . . . .	133,489	53,260		
<b>31</b>	<b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	133,643	53,702			

<b>Part III Analysis of Changes in Net Assets or Fund Balances</b>		
<b>1</b>	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) . . . . .	<b>1</b> 133,489
<b>2</b>	Enter amount from Part I, line 27a . . . . .	<b>2</b> -80,229
<b>3</b>	Other increases not included in line 2 (itemize) ▶ _____	<b>3</b> 0
<b>4</b>	Add lines 1, 2, and 3 . . . . .	<b>4</b> 53,260
<b>5</b>	Decreases not included in line 2 (itemize) ▶ _____	<b>5</b> 0
<b>6</b>	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	<b>6</b> 53,260

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

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

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

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

<b>2</b>	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 }	<b>2</b>	
<b>3</b>	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		}	<b>3</b>

**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

<b>(a)</b> Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	<b>(c)</b> Net value of noncharitable-use assets	<b>(d)</b> Distribution ratio (col (b) divided by col (c))
2014	612,002	77,018	7.946220
2013	714,439	108,853	6.563338
2012	656,277	234,717	2.796035
2011	1,049,026	384,563	2.727839
2010	928,041	500,685	1.853543
<b>2</b>	<b>Total</b> of line 1, column (d).		<b>2</b> 21.886975
<b>3</b>	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		<b>3</b> 4.377395
<b>4</b>	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.		<b>4</b> 53,436
<b>5</b>	Multiply line 4 by line 3.		<b>5</b> 233,910
<b>6</b>	Enter 1% of net investment income (1% of Part I, line 27b).		<b>6</b> 0
<b>7</b>	Add lines 5 and 6.		<b>7</b> 233,910
<b>8</b>	Enter qualifying distributions from Part XII, line 4.		<b>8</b> 751,899

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)

Table with 11 rows for excise tax calculations. Includes fields for exempt foundations, domestic foundations, tax under section 511, and credits/payments. Total tax due is 938.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions about political influence, tax on political expenditures, and substantial contributors. Includes Yes/No columns.

**Part VII-A Statements Regarding Activities (continued)**

<b>11</b>	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).	<b>11</b>		<b>No</b>
<b>12</b>	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)	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>N/A</b>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of <b>HOLLY TOPLITZKY</b> Telephone no <b>(323) 658-5477</b> Located at <b>8383 WILSHIRE BLVD SUITE 240 BEVERLY HILLS CA</b> ZIP+4 <b>90211</b>			
<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year <b>15</b>			
<b>16</b>	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	<b>16</b>	<b>Yes</b>	<b>No</b>

**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.**

		<b>Yes</b>	<b>No</b>
<b>1a</b>	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? ( <b>Exception.</b> 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>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>	<b>1b</b>	
<b>c</b>	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?	<b>1c</b>	<b>No</b>
<b>2</b>	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))		
<b>a</b>	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 <b>20</b> ____, <b>20</b> ____, <b>20</b> ____, <b>20</b> ____		
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions)	<b>2b</b>	
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here <b>20</b> ____, <b>20</b> ____, <b>20</b> ____, <b>20</b> ____		
<b>3a</b>	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>b</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? ( <i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015.</i> )	<b>3b</b>	
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>	<b>No</b>
<b>b</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?	<b>4b</b>	<b>No</b>

**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))?  Yes  No

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

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

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

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

**b** If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  Yes  No  
 Organizations relying on a current notice regarding disaster assistance check here.

**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  Yes  No  
 If "Yes," attach the statement required by Regulations section 53.4945–5(d).

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

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No  
 If "Yes" to 6b, file Form 8870.

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

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

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

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

(a) Name and address	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
LOREEN ARBUS 8383 WILSHIRE BLVD SUITE 240 BEVERLY HILLS, CA 90211	PRESIDENT 30 00	0	0	0
HOLLY TOPLITZKY 8383 WILSHIRE BLVD SUITE 240 BEVERLY HILLS, CA 90211	SECRETARY/TREASURER 10 00	0	0	0

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

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
CHARLES N CONWAY 525 W 135TH ST NEW YORK, NY 10031	ASS'T ADMIN 40 00	26,119	0	0
HUNTER C MOORE 608 W 140 ST 6 NEW YORK, NY 10031	ASS'T ADMIN 40 00	7,812	0	0

**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
HAJOMA INC 8383 WILSHIRE BLVD 240 BEVERLY HILLS, CA 90211	ACCOUNTING SERVICES	55,508
RONALD D TOPLITZKY CPA 8383 WILSHIRE BLVD 240 BEVERLY HILLS, CA 90211	INCOME TAX SERVICES	16,310
EIN SOF COMMUNICATIONS 11601 WILSHIRE BLVD 500 LOS ANGELES, CA 90025	CONSULTING	15,600
FRANCIS J MASSINO 175 WEST 79TH STREET 1A NEW YORK, NY 10024	MANAGEMENT CONSULTING	8,750
THE INDUSTRY EDGE 1496 STEARNS DRIVE LOS ANGELES, CA 90035	COMPUTER CONSULTING	2,916
<b>Total</b> 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
<b>1</b> _____	
<b>2</b> _____	
<b>3</b> _____	
<b>4</b> _____	

**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	
<b>1</b> _____		
<b>2</b> _____		
All other program-related investments. See instructions		
<b>3</b> _____		
<b>Total.</b> Add lines 1 through 3 . . . . . ▶		0

**Part X Minimum Investment Return**

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	0
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	54,250
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	54,250
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	54,250
<b>4</b>	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	814
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	<b>5</b>	53,436
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	2,672

**Part XI Distributable Amount**

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

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	2,672
<b>2a</b>	Tax on investment income for 2015 from Part VI, line 5. . . . .	<b>2a</b>	
<b>b</b>	Income tax for 2015 (This does not include the tax from Part VI ). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	0
<b>3</b>	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	<b>3</b>	2,672
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	0
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	2,672
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	<b>7</b>	2,672

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

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
<b>a</b>	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	<b>1a</b>	751,899
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	751,899
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions). . . . .	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	751,899

**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
<b>1</b> Distributable amount for 2015 from Part XI, line 7				2,672
<b>2</b> Undistributed income, if any, as of the end of 2015				
<b>a</b> Enter amount for 2014 only. . . . .			0	
<b>b</b> Total for prior years 20___, 20___, 20___		0		
<b>3</b> Excess distributions carryover, if any, to 2015				
<b>a</b> From 2010. . . . .	903,014			
<b>b</b> From 2011. . . . .	1,029,800			
<b>c</b> From 2012. . . . .	644,541			
<b>d</b> From 2013. . . . .	708,996			
<b>e</b> From 2014. . . . .	608,151			
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	3,894,502			
<b>4</b> Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ <u>751,899</u>				
<b>a</b> Applied to 2014, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2015 distributable amount. . . . .				2,672
<b>e</b> Remaining amount distributed out of corpus	749,227			
<b>5</b> Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	4,643,729			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> 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		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015 . . . . .				0
<b>7</b> 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			
<b>8</b> Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions). . . . .	903,014			
<b>9</b> <b>Excess distributions carryover to 2016.</b> Subtract lines 7 and 8 from line 6a . . . . .	3,740,715			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2011. . . . .	1,029,800			
<b>b</b> Excess from 2012. . . . .	644,541			
<b>c</b> Excess from 2013. . . . .	708,996			
<b>d</b> Excess from 2014. . . . .	608,151			
<b>e</b> Excess from 2015. . . . .	749,227			

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

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling. . . . ▶

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

**2a** Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .

	Tax year	Prior 3 years			<b>(e) Total</b>
	<b>(a) 2015</b>	<b>(b) 2014</b>	<b>(c) 2013</b>	<b>(d) 2012</b>	
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)**

**1 Information Regarding Foundation Managers:**

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

LOREEN ARBUS

**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

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**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

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

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**c** Any submission deadlines

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**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)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . .</b>				<b>3a</b> 607,971
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b>				<b>3b</b> 0





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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
ABILITY FIRST STROLL & ROLL 1300 E GREEN STREET PASADENA, CA 91106	NONE	501(C)(3)	LIFE-CHANGING PROGRAMS FOR ADULTS AND CHILDREN WITH DEVELOPMENT DISABILITIES	500
ACADEMY OF TELEVISION ARTS & SCIENCES 5220 LANKERSHIM BLVD NO HOLLYWOOD, CA 91601	NONE	501(C)(3)	ADVANCEMENT OF TELECOMMUNICATION ARTS AND SCIENCES AND TO FOSTER CREATIVE LEADERSHIP IN THE TELECOMMUNICATION INDUSTRY	35,000
ALFRED MANN FOUNDATION PO BOX 802456 SANTA CLARITA, CA 91380	NONE	501(C)(3)	SUPPORTS MEDICAL RESEARCH FOR DIABETES & NEURAL MUSC	20,000
AMERICAN FOLK ART MUSEUM 2 LINCOLN SQUARE NEW YORK, NY 10023	NONE	501(C)(3)	SUPPORT THE ARTS	2,500
AMERICAN JEWISH WORLD SERVICE 45 WEST 36TH STREET NEW YORK, NY 10018	NONE	501(C)(3)	ORGANIZATION STRIVES TO END POVERTY AND PROMOTE HUMAN RIGHTS IN THE DEVELOPING WORLD	500
AMERICAN LUNG ASSOCIATION 3325 WILSHIRE BLVD SUITE 900 LOS ANGELES, CA 90010	NONE	501(C)(3)	IS A LEADING ORGANIZATION WORKING TO SAVE LIVES BY IMPROVING LUNG HEALTH AND PREVENTING LUNG DISEASE, THROUGH RESEARCH, EDUCATION AND ADVOCACY	2,500
BROOKLYN MUSEUM 200 EASTERN PKWY BROOKLYN, NY 11238	NONE	501(C)(3)	SUPPORT THE ARTS	2,025
CAUCUS FOR PRODUCERS WRITERS & DIRECTORS PO BOX 11236 BURBANK, CA 91510	NONE	501(C)(3)	THE CAUCUS STRIVES TO ELEVATE PROGRAM QUALITY IN TELEVISION AND NEW MEDIA BY PROMOTING AND PROTECTING THE ARTISTIC, INTELLECTUAL AND ECONOMIC RIGHTS OF PRODUCERS, WRITERS & DIRECTORS	1,500
CITY COLLEGE CENTER FOR THE ARTS WILLE ADMINISTRATIVE BLDG RM 205 NEW YORK, NY 10031	NONE	501(C)(3)	SUPPORT THE ARTS	1,810
CRYSTAL BRIDGES MUSEUM OF AMERICAN ART 600 MUSEUM WAY BENTONVILLE, AR 72712	NONE	501(C)(3)	SUPPORTS THE ARTS	50,000
FRIENDS OF CALIFORNIANS WITH DISABILITIES 16612 LANDMARK AVE YORBA LINDA, CA 92886	NONE	501(C)(3)	INCREASE EMPLOYMENT AND INDEPENDENT LIVING OPPORTUNITIES FOR PEOPLE WITH DISABILITIES	250
GABRIELLE'S ANGEL FOUNDATION 136 EAST 57TH STREET 1704 NEW YORK, NY 10022	NONE	501(C)(3)	CANCER RESEARCH	15,000
GENNA DAVIS INSTITUTE ON GENDER IN MEDIA PO BOX 285 HUNTINGTON BEACH, CA 92648	NONE	501(C)(3)	WORKING WITHIN THE MEDIA AND ENTERTAINMENT INDUSTRY TO ENGAGE, EDUCATE, AND INFLUENCE THE NEED TO DRAMATICALLY IMPROVE, GENDER BALANCE, REDUCE STEREOTYPING AND CREATE DIVERSE FEMALE CHARACTERS IN ENTERTAINMENT TARGETING CHILDREN 11 AND UNDER	1,000
HAVE ART WILL TRAVEL 100 READE ST NEW YORK, NY 10013	NONE	501(C)(3)	TO INSPIRE AND EMPOWER PEOPLE TO LIVE FEARLESSLY	-1,650
HEDGE FUNDS CARE 330 7TH AVE STE 2B NEW YORK, NY 10001	NONE	501(C)(3)	PREVENTION AND TREATMENT OF CHILD ABUSE	1,000
<b>Total . . . . .</b>				<b>607,971</b>

**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)				
<b>a</b> <i>Paid during the year</i>				
LINCOLN CENTER CORPORATE FUND 70 LINCOLN CENTER PLAZA NEW YORK, NY 10023	NONE	501(C)(3)	SUPPORTS THE PERFORMING ARTS	16,700
LOS ANGELES COUNTY MUSEUM OF ART 5905 WILSHIRE BLVD LOS ANGELES, CA 90036	NONE	501(C)(3)	ADVANCE APPRECIATION OF ART AND THE ARTS	58,610
LOS ANGELES FIRE DEPT FDN 1875 CENTURY PARK EAST 200 LOS ANGELES, CA 90067	NONE	501(C)(3)	THE LOS ANGELES FIRE DEPARTMENT FOUNDATION SUPPORTS THE LAFD IN PROTECTING LIFE, PROPERTY, AND THE ENVIRONMENT BY PROVIDING ESSENTIAL EQUIPMENT, TRAINING, AND PUBLIC OUTREACH PROGRAMS TO SUPPLEMENT CITY RESOURCES	23,500
METROPOLITAN MUSEUM OF ART 1000 FIFTH AVENUE NEW YORK, NY 10028	NONE	501(C)(3)	SUPPORTS THE ARTS	23,488
MUSEUM OF ARTS & DESIGN 2 COLUMBUS CIRCLE NEW YORK, NY 10019	NONE	501(C)(3)	EXPLORES ART, DESIGN AND CRAFTS	9,414
MUSEUM OF MODERN ART - NY 11 WEST 53RD STREET NEW YORK, NY 10019	NONE	501(C)(3)	SUPPORTS THE ARTS	4,800
MUSEUM OF MODERN ART - NY 11 WEST 53RD STREET NEW YORK, NY 10019	NONE	501(C)(3)	SUPPORT OF MODERN ART	25,000
MUSEUM OF THE CITY OF NEW YORK 1220 FIFTH AVE NEW YORK, NY 10029	NONE	501(C)(3)	SUPPORTS THE ARTS	914
NEW YORK LANDMARKS CONSERVANCY 1 WHITEHALL ST NEW YORK, NY 10004	NONE	501(C)(3)	DEDICATED TO PRESERVING, REVITALIZING, AND REUSING NEW YORK'S ARCHITECTURALLY SIGNIFICANT BUILDINGS	500
NEW YORK WOMEN IN FILM & TELEVISION 6 E 39TH STEET 1200 NEW YORK, NY 10016	NONE	501(C)(3)	SUPPORTS WOMEN IN THE PERFORMING ARTS	32,700
PALEY CENTER - BH 465 N BEVERLY DRIVE BEVERLY HILLS, CA 90210	NONE	501(C)(3)	SUPPORTS THE PERFORMING ARTS	47,950
PALEY CENTER FOR MEDIA 25 W 52ND ST NEW YORK, NY 10019	NONE	501(C)(3)	SOCIAL SIGNIFICANCE OF FILM AND TELEVISION IN OUR SOCIETY	64,680
SOKOL MEDIA LLC FBO QUAD PREP SCHOOL 330 WASHINGTON STREET 400 HOBOKEN, NJ 07030	NONE	501(C)(3)	SUPPORTIVE EDUCATIONAL ENVIRONMENT FOR CHILDREN WITH A SPECIFIC FORM OF ASPERGER'S SYNDROME	4,995
STUDIO MUSEUM IN HARLEM 144 W 125TH STREET NEW YORK, NY 10027	NONE	501(C)(3)	SUPPORT THE ARTS	450
THE RUBIN MUSEUM OF ART 150 W 17TH STREET NEW YORK, NY 10011	NONE	501(C)(3)	SUPPORT THE ARTS	3,400
<b>Total . . . . .</b>				<b>607,971</b>

**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)				
<b>a</b> <i>Paid during the year</i>				
THE SHIELD INSTITUTE 144-61 ROOSEVELT AVENUE NEW YORK, NY 11354	NONE	501(C)(3)	ENRICH AND IMPROVE THE LIVES OF THOSE WITH AUTISM SPECTRUM DISORDER AND INTELLECTUAL/DEVELOPMENT DISABILITIES	1,500
THE SYNERGOS INSTITUTE 51 MADISON AVE NEW YORK, NY 10010	NONE	501(C)(3)	SUPPORTS GLOBAL EFFORT FOR SOCIAL PROGRESS	25,000
TOWN HALL LOS ANGELES 515 S FLOWER ST LOS ANGELES, CA 90071	NONE	501(C)(3)	PRESENT ISSUES THAT EFFECT ANGELENOS AND PROVIDE A PLATFORM TO THE DISCUSSION OF SOLUTIONS FROM A NONPARTISAN POINT OF VIEW	10,250
UNITED CEREBRAL PALSY OF NYC 80 MAIDEN LANE NEW YORK, NY 10038	NONE	501(C)(3)	SUPPORTS MEDICAL RESEARCH FOR CEREBRAL PALSY	2,500
US BUSINESS LEADERSHIP NETWORK 1310 BRADDOCK PLACE 101 ALEXANDRIA, VA 22314	NONE	501(C)(3)	TO HELP BUSINESS DRIVE PERFORMANCE BY LEVERAGING DISABILITY INCLUSION IN THE WORKPLACE, SUPPLY CHAIN, AND MARKETPLACE	25,000
USC ANNEBERG SCHOOL FOR COMMUNICATIONS 3502 WATT WAY SUITE 222 LOS ANGELES, CA 90089	NONE	501(C)(3)	THE MEDIA, DIVERSITY, & SOCIAL CHANGE (MDSC) INITIATIVE AT USC'S ANNEBERG SCHOOL FOR COMMUNICATION AND JOURNALISM IS A LEADING THINK TANK DEDICATED TO ADDRESSING ISSUES OF INEQUALITY IN ENTERTAINMENT	20,000
WHITNEY MUSEUM 945 MADISON AVENUE NEW YORK, NY 10021	NONE	501(C)(3)	SUPPORTS ART PROGRAMS AND PRESERVATION	3,000
WOMEN'S DONORS NETWORK 565 COMMERCIAL ST 300 SAN FRANCISCO, CA 94111	NONE	501(C)(3)	ADVANCES A JUST, EQUITABLE, AND SUSTAINABLE WORLD THROUGH THE POWER OF PHILANTHROPY, WOMEN'S LEADERSHIP, AND COLLECTIVE AND INDIVIDUAL ACITON	8,800
WOMEN'S ENEWS 6 BARCLAY STREET 6TH FLOOR NEW YORK, NY 10007	NONE	501(C)(3)	PROVIDES ELECTRONIC NEWS OF WOMENS ISSUES	3,825
WOMEN'S MEDIA CENTER 1825 K STREET NW SUITE 400 WASHINGTON, DC 20006	NONE	501(C)(3)	HAS THE GOAL OF MAKING WOMEN VISABLE AND POWERFUL IN THE MEDIA	54,060
WOMENSPHERE FOUNDATION 1745 BROADWAY 17TH FLOOR NEW YORK, NY 10019	NONE	501(C)(3)	DEDICATED TO EMPOWERING WOMEN TO LEAD	5,000
<b>Total . . . . .</b>				<b>607,971</b>

## TY 2015 Accounting Fees Schedule

**Name:** THE LOREEN ARBUS FOUNDATION

**EIN:** 75-3126107

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	71,818	0		71,818

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

## TY 2015 Depreciation Schedule

**Name:** THE LOREEN ARBUS FOUNDATION

**EIN:** 75-3126107

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
DELL 30" MONITOR	2011-03-14	800	560	SL	5 000000000000	160	0		
COMPUTER	2011-02-22	2,002	1,400	SL	5 000000000000	400	0		
COMPUTER	2011-03-25	2,206	1,544	SL	5 000000000000	441	0		
KONICA MINOLTA COPIER C220	2013-01-24	2,500	1,161	200DB	7 000000000000	383	0		
KONICA MINOLTA COPIER C35	2013-01-24	2,500	1,161	200DB	7 000000000000	383	0		
ZEROX COPIER	2013-10-24	4,973	1,548	200DB	7 000000000000	979	0		

**TY 2015 Land, Etc.  
Schedule**

**Name:** THE LOREEN ARBUS FOUNDATION

**EIN:** 75-3126107

<b>Category / Item</b>	<b>Cost / Other Basis</b>	<b>Accumulated Depreciation</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
DELL 30" MONITOR	800	720	80	
COMPUTER	2,002	1,800	202	
COMPUTER	2,206	1,985	221	
KONICA MINOLTA COPIER C220	2,500	1,544	956	
KONICA MINOLTA COPIER C35	2,500	1,544	956	
ZEROX COPIER	4,973	2,527	2,446	

## TY 2015 Legal Fees Schedule

**Name:** THE LOREEN ARBUS FOUNDATION

**EIN:** 75-3126107

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	2,191	0		2,191

## TY 2015 Other Expenses Schedule

**Name:** THE LOREEN ARBUS FOUNDATION

**EIN:** 75-3126107

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
SUPPLIES	6,541	0		6,539
TELEPHONE	3,774	0		3,774
POSTAGE, SHIPPING, DELIVERY	5,710	0		5,710
EQUIPMENT RENTAL, MAINTENANCE	594	0		594
INSURANCE	2,707	0		2,707
OUTSIDE COMPUTER SERVICE	2,916	0		2,916
BANK CHARGES	274	0		274
BOOKS, SUBSCRIPTIONS, REFERENCE	355	0		355
MEMBERSHIP DUES	500	0		500

## TY 2015 Other Professional Fees Schedule

**Name:** THE LOREEN ARBUS FOUNDATION

**EIN:** 75-3126107

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MANAGEMENT CONSULTING	8,750	0		8,750
PROGRAM SERVICE FEES	15,600	0		0

**TY 2015 Substantial Contributors  
Schedule****Name:** THE LOREEN ARBUS FOUNDATION**EIN:** 75-3126107

<b>Name</b>	<b>Address</b>
LOREEN ARBUS	8383 WILSHIRE BLVD SUITE 240 BEVERLY HILLS, CA 90211
GOLDENSON ARBUS FOUNDATION	C/O MARYELLEN MASTROGIORGIO 35 UNDERHILL STREET TUCKAHOE STREET, NY 10707

# TY 2015 Taxes Schedule

**Name:** THE LOREEN ARBUS FOUNDATION

**EIN:** 75-3126107

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL	3,774	0		3,774
FILING FEES	95	0		95

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

**Schedule of Contributors**

OMB No 1545-0047

Department of the Treasury  
Internal Revenue Service

▶ **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](http://www.irs.gov/form990).

**2015**

**Name of the organization**  
THE LOREEN ARBUS FOUNDATION

**Employer identification number**  
75-3126107

**Organization type** (check one)

**Filers of:**

**Section:**

Form 990 or 990-EZ

- 501(c)( ) (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization

Form 990-PF

- 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 **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 33<sup>1</sup>/<sub>3</sub>% 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).

<b>Name of organization</b> THE LOREEN ARBUS FOUNDATION	<b>Employer identification number</b> 75-3126107
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<b>Part I Contributors</b> (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
—	See Additional Data Table _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution )
—	_____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution )
—	_____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution )
—	_____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution )
—	_____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution )
—	_____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution )

**Name of organization**  
THE LOREEN ARBUS FOUNDATION

**Employer identification number**  
75-3126107

**Part II** **Noncash Property**  
(see instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	_____	_____ \$	_____
	_____		
	_____		

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	_____	_____ \$	_____
	_____		
	_____		

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	_____	_____ \$	_____
	_____		
	_____		

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	_____	_____ \$	_____
	_____		
	_____		

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	_____	_____ \$	_____
	_____		
	_____		

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	_____	_____ \$	_____
	_____		
	_____		

Name of organization  
THE LOREEN ARBUS FOUNDATION

Employer identification number  
75-3126107

**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
.			

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____
--	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
.			

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____
--	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
.			

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____
--	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
.			

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____
--	_____

**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 75-3126107  
**Name:** THE LOREEN ARBUS FOUNDATION

Form 990 Schedule B, 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	GOLDENSON ARBUS FOUNDATION  C/O M MASTROGIORGIO 35 UNDERHILL ST TUCKAHOE, NY 10707	\$ 200,000	<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )
2	GOLDENSON ARBUS FOUNDATION  C/O M MASTROGIORGIO 35 UNDERHILL ST TUCKAHOE, NY 10707	\$ 156,000	<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )
3	LOREEN ARBUS 8383 WILSHIRE BLVD SUITE 240 BEVERLY HILLS, CA 90211	\$ 18,000	<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )
4	LOREEN ARBUS 8383 WILSHIRE BLVD SUITE 240 BEVERLY HILLS, CA 90211	\$ 18,000	<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )
5	LOREEN ARBUS 8383 WILSHIRE BLVD SUITE 240 BEVERLY HILLS, CA 90211	\$ 18,000	<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )
6	LOREEN ARBUS 8383 WILSHIRE BLVD SUITE 240 BEVERLY HILLS, CA 90211	\$ 18,000	<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	LOREEN ARBUS 8383 WILSHIRE BLVD SUITE 240 BEVERLY HILLS, CA 90211	\$ 18,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contribution )
8	LOREEN ARBUS 8383 WILSHIRE BLVD SUITE 240 BEVERLY HILLS, CA 90211	\$ 50,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contribution )
9	LOREEN ARBUS 8383 WILSHIRE BLVD SUITE 240 BEVERLY HILLS, CA 90211	\$ 18,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contribution )
10	LOREEN ARBUS 8383 WILSHIRE BLVD SUITE 240 BEVERLY HILLS, CA 90211	\$ 18,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contribution )
11	LOREEN ARBUS 8383 WILSHIRE BLVD SUITE 240 BEVERLY HILLS, CA 90211	\$ 18,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contribution )
12	LOREEN ARBUS 8383 WILSHIRE BLVD SUITE 240 BEVERLY HILLS, CA 90211	\$ 18,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contribution )

Form 990 Schedule B, 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
13	LOREEN ARBUS 8383 WILSHIRE BLVD SUITE 240 BEVERLY HILLS, CA 90211	\$ 50,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contribution )
14	LOREEN ARBUS 8383 WILSHIRE BLVD SUITE 240 BEVERLY HILLS, CA 90211	\$ 18,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contribution )
15	LOREEN ARBUS 8383 WILSHIRE BLVD SUITE 240 BEVERLY HILLS, CA 90211	\$ 18,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contribution )
16	LOREEN ARBUS 8383 WILSHIRE BLVD SUITE 240 BEVERLY HILLS, CA 90211	\$ 18,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contribution )
17	LOREEN ARBUS 8383 WILSHIRE BLVD SUITE 240 BEVERLY HILLS, CA 90211	\$ 18,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contribution )