



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



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

Name of foundation The June Foundation		<b>A Employer identification number</b> 95-4745292	
Number and street (or P O box number if mail is not delivered to street address) 4221 Wilshire Blvd		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code Los Angeles, CA 90010		<b>B</b> Telephone number (see instructions)  (323) 648-3292	
<b>G</b> Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>  <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>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>  <b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <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>I</b> Fair market value of all assets at end of year (from Part II, col (c), line 16) <b>\$</b> 18,909,207		<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 )	

Part I Analysis of Revenue and Expenses <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)
Revenue	<b>1</b> Contributions, gifts, grants, etc , received (attach schedule) . . . . .	506,391			
	<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				
	<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	375,151			
	<b>b</b> Gross sales price for all assets on line 6a 3,531,559				
	<b>7</b> Capital gain net income (from Part IV , line 2) . . .		375,151		
	<b>8</b> Net short-term capital gain . . . . .			375,151	
	<b>9</b> Income modifications . . . . .				
	<b>10a</b> Gross sales less returns and allowances				
Operating and Administrative Expenses	<b>b</b> Less Cost of goods sold . . . . .				
	<b>c</b> Gross profit or (loss) (attach schedule) . . . . .				
	<b>11</b> Other income (attach schedule) . . . . .	504,884			
	<b>12 Total.</b> Add lines 1 through 11 . . . . .	1,386,426	375,151	375,151	
	<b>13</b> Compensation of officers, directors, trustees, etc				
	<b>14</b> Other employee salaries and wages . . . . .	203,954			
	<b>15</b> Pension plans, employee benefits . . . . .				
	<b>16a</b> Legal fees (attach schedule). . . . .				
	<b>b</b> Accounting fees (attach schedule). . . . .	45,281			
	<b>c</b> Other professional fees (attach schedule) . . . . .	5,925			
	<b>17</b> Interest . . . . .				
	<b>18</b> Taxes (attach schedule) (see instructions) . . .				
	<b>19</b> Depreciation (attach schedule) and depletion . . .	7,092			
	<b>20</b> Occupancy . . . . .				
	<b>21</b> Travel, conferences, and meetings. . . . .				
	<b>22</b> Printing and publications . . . . .				
	<b>23</b> Other expenses (attach schedule). . . . .	34,220			
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23 . . . . .	296,472	0		0
	<b>25</b> Contributions, gifts, grants paid . . . . .	781,635			781,635
	<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	1,078,107	0		781,635
	<b>27</b> Subtract line 26 from line 12				
	<b>a Excess of revenue over expenses and disbursements</b>	308,319			
	<b>b Net investment income</b> (if negative, enter -0-)		375,151		
	<b>c Adjusted net income</b> (if negative, enter -0-)			375,151	

<b>Part II</b> <b>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 . . . . .	1,477,283	2,107,971	2,107,971
	<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) ▶ _____ 632,611 Less allowance for doubtful accounts ▶ _____	1,722,803	632,611	632,611
	<b>8</b>	Inventories for sale or use . . . . .			
	<b>9</b>	Prepaid expenses and deferred charges . . . . .			
	<b>10a</b>	Investments—U S and state government obligations (attach schedule)	92,611	92,611	92,611
	<b>b</b>	Investments—corporate stock (attach schedule) . . . . .	3,733,649	7,032,199	7,032,199
	<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) . . . . .	10,491,180	8,600,907	8,600,907
	<b>14</b>	Land, buildings, and equipment basis ▶ _____ 450,000 Less accumulated depreciation (attach schedule) ▶ _____ 7,092		442,908	442,908
	<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)	17,517,526	18,909,207	18,909,207
<b>Liabilities</b>	<b>17</b>	Accounts payable and accrued expenses . . . . .			
	<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) . . . . .		0	
<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 . . . . .			
	<b>28</b>	Paid-in or capital surplus, or land, bldg, and equipment fund			
	<b>29</b>	Retained earnings, accumulated income, endowment, or other funds	17,517,526	18,909,207	
	<b>30</b>	<b>Total net assets or fund balances</b> (see instructions) . . . . .	17,517,526	18,909,207	
	<b>31</b>	<b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	17,517,526	18,909,207	

**Part III Analysis of Changes in Net Assets or Fund Balances**

<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>	17,517,526
<b>2</b>	Enter amount from Part I, line 27a . . . . .	<b>2</b>	308,319
<b>3</b>	Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	1,083,362
<b>4</b>	Add lines 1, 2, and 3 . . . . .	<b>4</b>	18,909,207
<b>5</b>	Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	
<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>	18,909,207

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 See Additional Data Table				
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 See Additional Data Table			
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 (l) 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 See Additional Data Table			
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	375,151
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	375,151

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	765,483	17,517,526	0 04370
2013	865,910	17,092,357	0 05066
2012	784,910	16,194,716	0 04847
2011	853,763	16,762,509	0 05093
2010	562,622	15,441,440	0 03644

2 Total of line 1, column (d).	2	0 230195
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 046039
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	4	
5 Multiply line 4 by line 3.	5	
6 Enter 1% of net investment income (1% of Part I, line 27b).	6	3,752
7 Add lines 5 and 6.	7	3,752
8 Enter qualifying distributions from Part XII, line 4.	8	781,635

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 ☐ and enter "N/A" on line 1  
Date of ruling or determination letter \_\_\_\_\_  
(attach copy of letter if necessary—see instructions)

2

Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)

3

Add lines 1 and 2.

4

Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)

5

Tax based on investment income.Subtract line 4 from line 3 If zero or less, enter -0-

6

Credits/Payments

7

Total credits and payments Add lines 6a through 6d.

8

Enter any penalty for underpayment of estimated tax Check here ☐ if Form 2220 is attached

9

Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed

10

Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.

11

Enter the amount of line 10 to be Credited to 2015 estimated tax 11,248 Refunded

1

3,752

2

3

3,752

4

5

3,752

6a

15,000

6b

6c

6d

7

15,000

8

9

10

11,248

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>			No
1b				No
c	Did the foundation file Form 1120-POL for this year?			No
1c				No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$ (2) On foundation managers \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? <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		No
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		No
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		No

Form 990-PF (2015)

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 ▶ Matthew Kest Telephone no ▶ (323) 648-3292 Located at ▶ 4221 Wilshire Blvd Suite 390 Los Angeles CA ZIP+4 ▶ 90010			
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		No
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		No
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		No
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)**

<b>5a</b> During the year did the foundation pay or incur any amount to				
<b>(1)</b> Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>(2)</b> 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			
<b>(3)</b> Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>(4)</b> 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			
<b>(5)</b> 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>b</b> If any answer is "Yes" to 5a(1)–(5), did <b>any</b> 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)?		<b>5b</b>		<b>No</b>
Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>			
<b>c</b> 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 checked="" type="checkbox"/> No			
<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>				
<b>6a</b> 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>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		<b>6b</b>		<b>No</b>
<i>If "Yes" to 6b, file Form 8870</i>				
<b>7a</b> 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>b</b> If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		<b>7b</b>		<b>No</b>

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

<b>1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).</b>				
(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
Michael Kest 4221 Wilshire Blvd Suite 390 Los Angeles, CA 90010	President 2 00	0		
Matthew Kest 4221 Wilshire Blvd Suite 390 Los Angeles, CA 90010	CFO 40 00	0		
Yosef Manela 6300 Wilshire Blvd Suite 2030 Los Angeles, CA 90048	Secretary 1 00	0		
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
(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
NONE				
<b>Total</b> number of other employees paid over \$50,000.				

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. ▶

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. ▶



**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>	0
<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>	0
<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>	
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	0
<b>4</b>	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	0
<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>	0
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	0

**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>	
<b>2a</b>	Tax on investment income for 2015 from Part VI, line 5. . . . .	<b>2a</b>	3,752
<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>	3,752
<b>3</b>	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	<b>3</b>	3,752
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	3,752
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	
<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>	0

**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>	781,635
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	
<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>	781,635
<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>	3,752
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	777,883

**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				0
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only. . . . .				
b Total for prior years 20____, 20____, 20____				
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. . . . .				
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ 781,635				
a Applied to 2014, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions). . . . .				
c Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
d Applied to 2015 distributable amount. . . . .				
e Remaining amount distributed out of corpus	781,635			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	781,635			
b Prior years' undistributed income Subtract line 4b from line 2b. . . . .				
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. . . . .				
d Subtract line 6c from line 6b Taxable amount—see instructions . . . . .				
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .				
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). . . . .				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions). . .				
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a. . . . .	781,635			
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. . . .	781,635			

## 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	


--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

--	--	--	--	--

## 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>	781,635
<div>b Approved for future payment</div>				
<div>Total . . . . .</div>			<div>▶ 3b</div>	

Enter gross amounts unless otherwise indicated

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

Form **990-PF** (2015)

**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?

<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of			
<b>(1)</b> Cash. . . . .	<b>1a(1)</b>		<b>No</b>
<b>(2)</b> Other assets. . . . .	<b>1a(2)</b>		<b>No</b>
<b>b</b> Other transactions			
<b>(1)</b> Sales of assets to a noncharitable exempt organization. . . . .	<b>1b(1)</b>		<b>No</b>
<b>(2)</b> Purchases of assets from a noncharitable exempt organization. . . . .	<b>1b(2)</b>		<b>No</b>
<b>(3)</b> Rental of facilities, equipment, or other assets. . . . .	<b>1b(3)</b>		<b>No</b>
<b>(4)</b> Reimbursement arrangements. . . . .	<b>1b(4)</b>		<b>No</b>
<b>(5)</b> Loans or loan guarantees. . . . .	<b>1b(5)</b>		<b>No</b>
<b>(6)</b> Performance of services or membership or fundraising solicitations. . . . .	<b>1b(6)</b>		<b>No</b>
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees. . . . .	<b>1c</b>		<b>No</b>
<b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</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 <b>(d)</b> 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.

\* \* \* \* \*

2016-11-14

\* \* \* \* \*

Signature of officer or trustee

Date

Title

May the IRS discuss this return with the preparer shown below

(see instr )? ☒ Yes ☐ No

(see instr )? ☒ Yes ☐ No

**Paid  
Preparer  
Use  
Only**

Print/Type preparer's name Yosef Y Manela CPA APC	Preparer's Signature	Date	Check if self-employed <input checked="" type="checkbox"/>	PTIN P00446103
Firm's name <input type="checkbox"/> Yosef Y Manela CPA A Professional Corporation			Firm's EIN <input type="checkbox"/>	
Firm's address <input type="checkbox"/> 6300 Wilshire Blvd Suite 2030 LOS ANGELES, CA 90048			Phone no (323) 782-0818	

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

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 P—Purchase <b>(b)</b> D—Donation	Date acquired <b>(c)</b> (mo , day, yr )	<b>(d)</b> Date sold (mo , day, yr )
Total Short Term Capital Gain	P	2015-01-01	2015-01-01
Total Long Term Capital Gain	P	2015-01-01	2015-01-01
195 Lakeside Dr	P		
Interactive Brokers Net Capital Gain	P	2015-01-01	2015-01-01
Luminous Brokers Net Capital Loss	P	2015-01-01	2015-01-01
Capital Gain Distribution	P	2015-01-01	2015-01-01

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

<b>(e)</b> Gross sales price	Depreciation allowed <b>(f)</b> (or allowable)	Cost or other basis <b>(g)</b> plus expense of sale	Gain or (loss) <b>(h)</b> (e) plus (f) minus (g)
1,513,622		1,540,916	-27,294
271,844		272,730	-886
1,371,657		1,322,579	49,078
373,578			373,578
		20,183	-20,183
858			858

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

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-) <b>or</b> <b>(l)</b> Losses (from col (h))
<b>(i)</b> F M V as of 12/31/69	Adjusted basis <b>(j)</b> as of 12/31/69	Excess of col (i) <b>(k)</b> over col (j), if any	
			-27,294
			-886
			49,078
			373,578
			-20,183
			858

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>				
National Soc For Hebrew Day Schools 1090 Coney Island Ave 3RD FL Brooklyn, NY 11210	None	PC	Public Support of Organization's Mission	200,000
Aish Tamid of Los Angeles 5909 W 3rd St Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	100
American Friends of Aish Hatorah 1417 S Doheny Dr Los Angeles, CA 90035	None	PC	Public Support of Organization's Mission	100
Bais Aharon 1430 14th St Lakewood, NJ 08701	None	PC	Public Support of Organization's Mission	100
Bais Chabad of Farmington Hills 32000 Middlebelt Rd Farmington Hills, MI 48334	None	PC	Public Support of Organization's Mission	500
Bais Gavriel 143 N Formosa Ave Los Angeles, CA 90336	None	PC	Public Support of Organization's Mission	100
Bais Medrash of Spring Valley 23 Union Rd Spring Valley, NY 10977	None	PC	Public Support of Organization's Mission	100
Bais Tefila 5417 Whitsett Ave 101 Valley Village, CA 91607	None	PC	Public Support of Organization's Mission	100
Bais Yaakov Los Angeles 7353 Beverly Blvd Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	750
Bais Yaakov School For Girls 7353 Beverly Blvd Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	1,675
Beis Medrash Elyon 73 Main St Monsey, NY 10952	None	PC	Public Support of Organization's Mission	100
Beit Knesset Torah Ohr Los Angeles 7200 Beverly Blvd Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	100
Binyan Torah 210 Giant Dr Richmond, VA 23224	None	PC	Public Support of Organization's Mission	100
Bnos Orchos Chaim 388 Chestnut St Lakewood, NJ 08701	None	PC	Public Support of Organization's Mission	1,900
Chabad of Monroe 261 Gravel Hill Rd Monroe Township, NJ 08831	None	PC	Public Support of Organization's Mission	100
<b>Total . . . . . ▶ 3a</b>				781,635



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>				
Chai Lifeline West Coast 9233 W Pico Blvd Suite 200 Los Angeles, CA 90035	None	PC	Public Support of Organization's Mission	402
Chemdas Torah Los Angeles Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	100
Chevra Kadisha 7832 Santa Monica Blvd West Hollywood, CA 90046	None	PC	Public Support of Organization's Mission	1,000
Chofetz Chaim Heritage Foundation 204 Clifton Ave Lakewood, NJ 08701	None	PC	Public Support of Organization's Mission	100
Community Essentials 9454 Wilshire Blvd 4th Fl Beverly Hills, CA 90212	None	PC	Public Support of Organization's Mission	300
Cong Chaye Olom Los Angeles Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	250
Cong Etz Chaim 1555 E 7th St Brooklyn, NY 11230	None	PC	Public Support of Organization's Mission	15,000
Cong Levi Yitzchok 356 N La Brea Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	1,000
Cong Maza Cohen - Sadogora 122 Harrison Avenue Brooklyn, NY 11206	None	PC	Public Support of Organization's Mission	100
Congregation Bais Naftoli 221 S La Brea Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	100
Congregation Kehilas Yaakov 7211 Beverly Blvd Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	2,000
Congregation Zichron Moshe 1441 Monmouth Ave Lakewood, NJ 08701	None	PC	Public Support of Organization's Mission	360
Cranbury Kollel 4A Cedar Brook Dr Cranbury, NJ 08512	None	PC	Public Support of Organization's Mission	100
Daas Chochma Los Angeles Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	750
EOM Los Angeles Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	1,000
<b>Total . . . . . ▶ 3a</b>				781,635

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> Paid during the year				
Ezras Avos Los Angeles Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	100
Ezrat Yisroel 4415 14th Ave Brooklyn, NY 11219	None	PC	Public Support of Organization's Mission	100
Hatzolo 1880 Ocean Ave New York, NY 11230	None	PC	Public Support of Organization's Mission	300
Institute For Dayanim 21751 W 11 MILE RD Southfield, MI 48076	None	PC	Public Support of Organization's Mission	360
Israel Purim Fund 205 Wet Beech St PO Box 630 Long Beach, NY 11561	None	PC	Public Support of Organization's Mission	100
JETS 16601 Rinaldi St Granada Hills, CA 91344	None	PC	Public Support of Organization's Mission	100
Jewish Routes 9027 W Pico Blvd Los Angeles, CA 90035	None	PC	Public Support of Organization's Mission	100
Kedushas Pinchas 1063 54th Street Brooklyn, NY 11219	None	PC	Public Support of Organization's Mission	250
Keren Zichron Moshe 22 Edward St Woodmere, NY 11598	None	PC	Public Support of Organization's Mission	100
Kneses Bais Yisroel 4221 Sunset Blvd Minneapolis, MN 55416	None	PC	Public Support of Organization's Mission	100
LA Teacher Center of Torah UMesorah 1030 Robertson Blvd Los Angeles, CA 90035	None	PC	Public Support of Organization's Mission	1,050
Ladies Aux of Bnos Orchos Chaim 410 Oberlin Ave S Lakewood Township, NJ 08701	None	PC	Public Support of Organization's Mission	18
LINK East 6022 W Pico Blvd Los Angeles, CA 90035	None	PC	Public Support of Organization's Mission	360
Maaseh Chesed 199 Lee Ave PMD 221 Brooklyn, NY 11211	None	PC	Public Support of Organization's Mission	2,660
Machon L'Hoyroa 168 Maple Ave Monsey, NY 10952	None	PC	Public Support of Organization's Mission	10,000
<b>Total . . . . . ▶ 3a</b>				781,635

**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>				
MBY CHARITY FUND 6022 W Pico Blvd 101 Los Angeles, CA 90035	None	PC	Public Support of Organization's Mission	720
Mesivta Keser Torah 503 11th Ave Belmar, NJ 07719	None	PC	Public Support of Organization's Mission	100
Metzad Congregation 662 Lefferts Ave Brooklyn, NY 11203	None	PC	Public Support of Organization's Mission	360
Misameach 326 3rd St Suite 305 Lakewood, NJ 08701	None	PC	Public Support of Organization's Mission	100
Mosdot Merkaz Letorah Israel 1569 46th St Brooklyn, NY 11219	None	PC	Public Support of Organization's Mission	100
Noam Hatorah 947 Park Ave Lakewood, NJ 08701	None	PC	Public Support of Organization's Mission	100
Od Yosef Chai 18 New County Rd Monsey, NY 10952	None	PC	Public Support of Organization's Mission	100
Ohel Miriam Los Angeles Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	100
Ohel Yitzchok Los Angeles Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	100
Ohr Elchonon Los Angeles Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	500
Ohr Eliyahu Rabbi's Fund Los Angeles Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	500
Ohr Haner 1654 53rd St Brooklyn, NY 11204	None	PC	Public Support of Organization's Mission	100
Ramot Torah Schools Los Angeles Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	50
Shaarei Torah 334 N La Brea Ave Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	400
Shuva Yisroel Los Angeles Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	500
<b>Total . . . . . ▶ 3a</b>				781,635

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> Paid during the year				
The Cheder Los Angeles Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	100
The Shul Fund Los Angeles Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	500
Tiferes Achim 1442 45th St Brooklyn, NY 11219	None	PC	Public Support of Organization's Mission	1,000
Tiferes Bachurim Los Angeles Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	100
TLC 9008 Cashio Los Angeles, CA 90035	None	PC	Public Support of Organization's Mission	750
Tomchei Shabbos Los Angeles Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	5,600
Torah For Special Children 6214 24 Ave Brooklyn, NY 11204	None	PC	Public Support of Organization's Mission	200
Tzedaka Fund 42 W 39th St RM 901 New York, NY 10018	None	PC	Public Support of Organization's Mission	1,925
United Institute of Karlin Stolin 1436 42nd St Brooklyn, NY 11219	None	PC	Public Support of Organization's Mission	100
Valley Torah High School 12517 Chandler Blvd Valley Village, CA 91607	None	PC	Public Support of Organization's Mission	1,000
Yeshiva Derech Chaim 1573 39th ST Brooklyn, NY 11218	None	PC	Public Support of Organization's Mission	100
Yeshiva Gedolah of Lakewood Los Angeles Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	100
Yeshiva High Tech 5870 W Olympic Blvd Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	250
Yeshiva Keren Hatorah 299 Monmouth Ave Lakewood, NJ 08701	None	PC	Public Support of Organization's Mission	100
Yeshiva Ner Aryeh 12422 Chandler Blvd Valley Village, CA 91607	None	PC	Public Support of Organization's Mission	100
Total . . . . . ▶ 3a				781,635

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> Paid during the year				
Yeshiva of the Telshe Alumni 4904 Independence Avenue Riverdale, NY 10471	None	PC	Public Support of Organization's Mission	1,000
Yeshiva Ohev Shalom 525 S Fairfax Ave Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	200
Yeshiva Ohr Menachem 8 Darby Rd Monsey, NY 10952	None	PC	Public Support of Organization's Mission	200
Yeshiva Orchos Chaim 410 Oberlin Ave S Lakewood Township, NJ 08701	None	PC	Public Support of Organization's Mission	1,800
Yeshiva Rav Isaacsohn 7223 Beverly Blvd Ste 201 Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	540
Yeshivas Chayel Olam Los Angeles Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	100
Yeshivas Knesses Bais Ahron Los Angeles Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	100
Yeshivas Ohev Shalom 525 S Fairfax Ave Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	180
Yeshivas Ohr Hameir Peekskill Los Angeles Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	500
Yeshivas Radin Los Angeles Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	100
Young Israel of Hancock Park 225 S La Brea Ave Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	500
Young Israel Of Northridge Los Angeles Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	100
Young Israel Tzedakah Fund 50 Eisenhower Drive Suite 102 Paramus, NJ 07652	None	PC	Public Support of Organization's Mission	5,500
Zichron Shlome Refuah Fund Los Angeles Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	50
West Coast Vaad Hacheshed 7200 Beverly Blvd Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	23,970
Total . . . . . ▶ 3a				781,635

**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>				
Marbeh Tzedakah 345 N La Brea 208 Los Angeles, CA 90036	None	PC	Public Support of Organization's Mission	1,455
Kollel Bais Yechiel 6080 N Whipple Street Chicago, IL 60659	None	PC	Public Support of Organization's Mission	500
Jewish Community Foundation 6505 Wilshire Blvd Suite 1200 Los Angeles, CA 90048	None	PC	Public Support of Organization's Mission	85,000
Fidelity Charitable Donor Advised F PO Box 770001 Cincinnati, OH 45277	None	PC	Public Support of Organization's Mission	400,000
<b>Total . . . . . ▶ 3a</b>				781,635

**TY 2015 Accounting Fees Schedule****Name:** The June Foundation**EIN:** 95-4745292**Software ID:** 15000324**Software Version:** 2015v2.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Accounting Fees	45,281	0	0	0

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 June Foundation

EIN: 95-4745292

Software ID: 15000324

Software Version: 2015v2.0

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
940 1st Ave, NY, NY	2015-06-13	360,000		SL	1 97 %	7,092			



**TY 2015 Investments Corporate Stock Schedule****Name:** The June Foundation**EIN:** 95-4745292**Software ID:** 15000324**Software Version:** 2015v2.0

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
International Brokers - 518854	1,447,064	1,447,064
Luminous Capital - 213942	3,942,032	3,942,032
Luminous Capital- 269263	637,700	637,700
Monarch Capital 1291	357,602	357,602
Monarch Capital 1291	647,801	647,801

**TY 2015 Investments Government Obligations Schedule****Name:** The June Foundation**EIN:** 95-4745292**Software ID:** 15000324**Software Version:** 2015v2.0**US Government Securities - End of  
Year Book Value:**

92,611

**US Government Securities - End of  
Year Fair Market Value:**

92,611

**State & Local Government  
Securities - End of Year Book  
Value:****State & Local Government  
Securities - End of Year Fair  
Market Value:**

**TY 2015 Investments - Other Schedule**

**Name:** The June Foundation

**EIN:** 95-4745292

**Software ID:** 15000324

**Software Version:** 2015v2.0

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
Luminous Capital Rimrock K-1	AT COST	1,919,825	1,919,825
Luminous Capital US Farming Realty FD LP	AT COST	927,834	927,834
Canyon Distressed Opportunity FD	AT COST	75,821	75,821
Global Credit Opp FD FKA Senior Credit F	AT COST	1,269,779	1,269,779
Special Situations Fund K-1	AT COST	295,233	295,233
CIBC World Markets Inc Vision Opp FD Tru	AT COST	867,876	867,876
Eastside Century Partners	AT COST	888,687	888,687
LC GOF III	AT COST	627,899	627,899
Direct Lending LP Class B	AT COST	190,155	190,155
Altair Marathon SOF, LLC	AT COST	492,694	492,694
Altair PCOF, LLC	AT COST		
195 Lakeside LLC	AT COST		
WC16 LLC	AT COST		
Spectra Energy Partners LP	AT COST		
Magellan Midstream Partners LP	AT COST		
Canyon Distress Oppotunity Fund	AT COST	64,428	64,428
Chase Merritt Fund II, LLC	AT COST		
CMRA Associates	AT COST		
CMRA Management	AT COST		
Neuman Dakota Investors LLC	AT COST	980,676	980,676
Altair-US Farming Realty Fund	AT COST		
Altair Direct Lending Fund LLC	AT COST		

**TY 2015 Land, Etc.  
Schedule****Name:** The June Foundation**EIN:** 95-4745292**Software ID:** 15000324**Software Version:** 2015v2.0

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
Buildings	360,000	7,092	352,908	352,908
Land	90,000		90,000	90,000

**TY 2015 Other Expenses Schedule****Name:** The June Foundation**EIN:** 95-4745292**Software ID:** 15000324**Software Version:** 2015v2.0

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Bank Charges	100			
Insurance	475			
Section 105 MERP	31,928			
Taxes, Licenses, & Permits	180			
Telephone	1,537			

**TY 2015 Other Income Schedule****Name:** The June Foundation**EIN:** 95-4745292**Software ID:** 15000324**Software Version:** 2015v2.0

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
Other Investment Income	499,884		
Rental Income - Noninvestment Property	5,000		

**TY 2015 Other Increases Schedule****Name:** The June Foundation**EIN:** 95-4745292**Software ID:** 15000324**Software Version:** 2015v2.0

Description	Amount
Prior Period Tax to Book Basis Adjustment	1,083,362

**TY 2015 Other Notes/Loans Receivable Short Schedule****Name:** The June Foundation**EIN:** 95-4745292**Software ID:** 15000324**Software Version:** 2015v2.0

Name of 501(c)(3) Organization	Balance Due
	632,611



**TY 2015 Other Professional Fees Schedule****Name:** The June Foundation**EIN:** 95-4745292**Software ID:** 15000324**Software Version:** 2015v2.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Legal Fees	5,925	0	0	0

<div>Schedule B</div> <div>(Form 990, 990-EZ, or 990-PF)</div> <div>Department of the Treasury Internal Revenue Service</div>	<div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF</div> <div>▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a></div>	<div>OMB No 1545-0047</div> <div>2015</div>
---	--	---

<div>Name of the organization</div> <div>The June Foundation</div>	<div>Employer identification number</div> <div>95-4745292</div>
--	---

Organization type (check one)

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

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 June Foundation	<b>Employer identification number</b> 95-4745292
--	---

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		\$ 200,000	Person <input checked="" type="checkbox"/>
	Michael Kest		Payroll <input type="checkbox"/>
	4221 Wilshire Blvd Los Angeles, CA 90010		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
2		\$ 306,391	Person <input checked="" type="checkbox"/>
	Kest 2012 Charitable Lead Annuity T		Payroll <input type="checkbox"/>
	5150 Overland Ave Culver City, CA 90230		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 )

<b>Name of organization</b> The June Foundation	<b>Employer identification number</b> 95-4745292
--	---

<b>Part II</b> <b>Noncash Property</b> (see instructions) Use duplicate copies of Part II if additional space is needed			
<b>(a)</b> <b>No. from Part I</b>	<b>(b)</b> <b>Description of noncash property given</b>	<b>(c)</b> <b>FMV (or estimate)</b> (see instructions)	<b>(d)</b> <b>Date received</b>
		\$	
<b>(a)</b> <b>No. from Part I</b>	<b>(b)</b> <b>Description of noncash property given</b>	<b>(c)</b> <b>FMV (or estimate)</b> (see instructions)	<b>(d)</b> <b>Date received</b>
		\$	
<b>(a)</b> <b>No. from Part I</b>	<b>(b)</b> <b>Description of noncash property given</b>	<b>(c)</b> <b>FMV (or estimate)</b> (see instructions)	<b>(d)</b> <b>Date received</b>
		\$	
<b>(a)</b> <b>No. from Part I</b>	<b>(b)</b> <b>Description of noncash property given</b>	<b>(c)</b> <b>FMV (or estimate)</b> (see instructions)	<b>(d)</b> <b>Date received</b>
		\$	
<b>(a)</b> <b>No. from Part I</b>	<b>(b)</b> <b>Description of noncash property given</b>	<b>(c)</b> <b>FMV (or estimate)</b> (see instructions)	<b>(d)</b> <b>Date received</b>
		\$	
<b>(a)</b> <b>No. from Part I</b>	<b>(b)</b> <b>Description of noncash property given</b>	<b>(c)</b> <b>FMV (or estimate)</b> (see instructions)	<b>(d)</b> <b>Date received</b>
		\$	
<b>(a)</b> <b>No. from Part I</b>	<b>(b)</b> <b>Description of noncash property given</b>	<b>(c)</b> <b>FMV (or estimate)</b> (see instructions)	<b>(d)</b> <b>Date received</b>
		\$	

Name of organization The June Foundation	Employer identification number 95-4745292
---	--

**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	
	_____	_____	
	_____	_____	
	--	_____	
	_____	_____	