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Form 990-PF

## Return of Private Foundation

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

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2015

Open to Public  
Inspection

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

Name of foundation Queen of Angels California Foundation		A Employer identification number 95-6071172	
% PETER MCANDREWS VP		B Telephone number (see instructions) (310) 260-8750	
Number and street (or P O box number if mail is not delivered to street address) 3110 MAIN STREET Suite 210		C If exemption application is pending, check here <input checked="" type="checkbox"/>	
City or town, state or province, country, and ZIP or foreign postal code SANTA MONICA, CA 90405		D 1. Foreign organizations, check here <input checked="" type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input checked="" type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		2. Foreign organizations meeting the 85% test, check here and attach computation <input checked="" type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input checked="" type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) <b>\$ 1,519,134</b>		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input checked="" type="checkbox"/>	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)		0		
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	45,145	45,145		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	-39,163			
	b Gross sales price for all assets on line 6a 637,278				
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total Add lines 1 through 11	5,982	45,145		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	25,584	25,584	0	0
	c Other professional fees (attach schedule)	21,115	21,115		
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	4,713	4,713		
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	382	382		
	24 Total operating and administrative expenses				
	Add lines 13 through 23	51,794	51,794	0	0
	25 Contributions, gifts, grants paid	98,500			98,500
	26 Total expenses and disbursements Add lines 24 and 25	150,294	51,794	0	98,500
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-144,312			
	b Net investment income (if negative, enter -0-)		0		
	c Adjusted net income (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>1</b> Cash—non-interest-bearing . . . . .		34,003	11,159	11,159
	<b>2</b> Savings and temporary cash investments . . . . .		17,036	39,570	39,570
	<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 . . . . .				
	<b>10a</b> Investments—U S and state government obligations (attach schedule)				
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .	1,381,544	1,225,966	1,225,966	
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .	291,295	242,439	242,439	
	<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 ► _____				
	Less accumulated depreciation (attach schedule) ► _____				
	<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)		1,723,878	1,519,134	1,519,134
	<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>Foundations that follow SFAS 117, check here ► <input checked="" type="checkbox"/></b>				
	<b>and complete lines 24 through 26 and lines 30 and 31.</b>				
	<b>24</b> Unrestricted . . . . .	1,087,840	1,519,134		
	<b>25</b> Temporarily restricted . . . . .	161,321			
	<b>26</b> Permanently restricted . . . . .	474,717			
	<b>Foundations that do not follow SFAS 117, check here ► <input type="checkbox"/></b>				
	<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				
	<b>30</b> <b>Total net assets or fund balances</b> (see instructions) . . . . .	1,723,878	1,519,134		
	<b>31</b> <b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	1,723,878	1,519,134		

**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) . . . . .	1	1,723,878
<b>2</b>	Enter amount from Part I, line 27a . . . . .	2	-144,312
<b>3</b>	Other increases not included in line 2 (itemize) ► _____	3	-60,432
<b>4</b>	Add lines 1, 2, and 3 . . . . .	4	1,519,134
<b>5</b>	Decreases not included in line 2 (itemize) ► _____	5	
<b>6</b>	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	6	1,519,134

**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 (b) P—Purchase D—Donation	Date acquired (c) (mo, day, yr)	Date sold (d) (mo, day, yr)	
<b>1 a</b>	WELLS FARGO #7700 LONG TERM TRANSACTIONS (SEE ATTACHED)	P	2000-01-01	2015-01-31	
<b>b</b>	WELLS FARGO #7700 SHORT TERM TRANSACTION	P	2015-01-01	2015-01-05	
<b>c</b>	CAPITAL GAIN DIVIDENDS	P			
<b>d</b>					
<b>e</b>					
<b>(e) Gross sales price</b>		<b>Depreciation allowed (f) (or allowable)</b>	<b>Cost or other basis (g) plus expense of sale</b>	<b>Gain or (loss) (h) (e) plus (f) minus (g)</b>	
<b>a</b>	454,569		481,014	-26,445	
<b>b</b>	175,549		195,427	-19,878	
<b>c</b>				7,160	
<b>d</b>					
<b>e</b>					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
<b>(i) F M V as of 12/31/69</b>	<b>Adjusted basis (j) as of 12/31/69</b>	<b>Excess of col (i) (k) over col (j), if any</b>	<b>(l)</b>		
<b>a</b>				-26,445	
<b>b</b>				-19,878	
<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>	-39,163
<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?  
If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part

Yes  No

**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	85,500	1,760,080	0 048577	
2013	78,450	1,682,178	0 046636	
2012	179,420	1,645,854	0 109013	
2011	170,309	1,711,914	0 099485	
2010	188,870	1,564,439	0 120727	
<b>2</b>	<b>Total of line 1, column (d).</b>		<b>2</b>	0 424438
<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>	0 084888
<b>4</b>	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.		<b>4</b>	1,705,590
<b>5</b>	Multiply line 4 by line 3.		<b>5</b>	144,784
<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>	144,784
<b>8</b>	Enter qualifying distributions from Part XII, line 4.		<b>8</b>	98,500

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

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

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1	1	0
Date of ruling or determination letter _____ <b>(attach copy of letter if necessary—see instructions)</b>			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	1	0
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b)	2	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) . . . . .	3	0
3	Add lines 1 and 2. . . . .	4	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) . . . . .	5	0
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3 If zero or less, enter -0- . . . . .	6	
6	Credits/Payments	6a	1,500
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6b	
b	Exempt foreign organizations—tax withheld at source. . . . .	6c	
c	Tax paid with application for extension of time to file (Form 8868). . . . .	6d	
d	Backup withholding erroneously withheld . . . . .	7	1,500
7	Total credits and payments Add lines 6a through 6d. . . . .	8	
8	Enter any <b>penalty</b> for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	9	
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	10	1,500
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	11	
11	Enter the amount of line 10 to be <b>Credited to 2015 estimated tax</b> <input type="checkbox"/> 1,500 <b>Refunded</b> <input type="checkbox"/>		

**Part VII-A Statements Regarding Activities**

		<b>Yes</b>	<b>No</b>
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? <input checked="" type="checkbox"/>	1a	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . .	1b	No
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.			
c	Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	1c	No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year <b>(1)</b> On the foundation <input type="checkbox"/> \$ _____ <b>(2)</b> On foundation managers <input type="checkbox"/> \$ _____	2	No
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____	3	No
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . If "Yes," attach a detailed description of the activities.	4a	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? If "Yes," attach a conformed copy of the changes <input checked="" type="checkbox"/>	4b	No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	5	No
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	6	Yes
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . If "Yes," attach the statement required by General Instruction T. <input checked="" type="checkbox"/>	7	Yes
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? . . . . .	8a	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV. . . . .	8b	Yes
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> CA	9	No
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	10	No
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV . . . . .		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses. . . . .		

**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 ►	13	Yes	
14	The books are in care of ► PETER MCANDREWS VP Telephone no ► (310) 260-8750 Located at ► 3110 MAIN STREET SUITE 210 SANTA MONICA CA ZIP +4 ► 90230			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . ► 15 and enter the amount of tax-exempt interest received or accrued during the year . . . . . ►			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority 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

**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
<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 checked="" type="checkbox"/> Yes	<input 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>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)? . . . . . Organizations relying on a current notice regarding disaster assistance check here. . . . . ►	1b	No
<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? . . . . .	1c	No
<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 ► 20____, 20____, 20____, 20____		
<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) . . . . .	2b	No
<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 ► 20____, 20____, 20____, 20____		
<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? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015) . . . . .	3b	
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . . . .	4a	No
<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? . . . . .	4b	No

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

5a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  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)? . . . . . 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? . . . . .  
*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? . . . . .

**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)**

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).				
<b>(a)</b> Name and address	Title, and average hours per week <b>(b)</b> devoted to position	<b>(c)</b> Compensation <b>(If not paid, enter -0-)</b>	<b>(d)</b> Contributions to employee benefit plans and deferred compensation	Expense account, <b>(e)</b> other allowances
See Additional Data Table				

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

**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".**

**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.

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.

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.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities. . . . .	1a	1,680,255
b	Average of monthly cash balances. . . . .	1b	51,308
c	Fair market value of all other assets (see instructions). . . . .	1c	0
d	<b>Total</b> (add lines 1a, b, and c). . . . .	1d	1,731,563
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	1e	
2	Acquisition indebtedness applicable to line 1 assets. . . . .	2	0
3	Subtract line 2 from line 1d. . . . .	3	1,731,563
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	4	25,973
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,705,590
6	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	6	85,280

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

1	Minimum investment return from Part X, line 6. . . . .	1	85,280
2a	Tax on investment income for 2015 from Part VI, line 5. . . . .	2a	0
b	Income tax for 2015 (This does not include the tax from Part VI ). . . . .	2b	
c	Add lines 2a and 2b. . . . .	2c	0
3	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	3	85,280
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	
5	Add lines 3 and 4. . . . .	5	85,280
6	Deduction from distributable amount (see instructions). . . . .	6	
7	<b>Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	7	85,280

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

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	1a	98,500
b	Program-related investments—total from Part IX-B. . . . .	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	2	0
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required). . . . .	3a	0
b	Cash distribution test (attach the required schedule). . . . .	3b	0
4	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	98,500
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions). . . . .	5	
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	6	98,500

**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				85,280
<b>2</b> Undistributed income, if any, as of the end of 2015				
<b>a</b> Enter amount for 2014 only. . . . .			82,471	
<b>b</b> Total for prior years 2013, 2012, 2011				
<b>3</b> Excess distributions carryover, if any, to 2015				
<b>a</b> From 2010. . . . .				
<b>b</b> From 2011. . . . .	0			
<b>c</b> From 2012. . . . .	0			
<b>d</b> From 2013. . . . .	0			
<b>e</b> From 2014. . . . .	0			
<b>f Total</b> of lines 3a through e. . . . .		0		
<b>4</b> Qualifying distributions for 2015 from Part XII, line 4 ► \$ 98,500				
<b>a</b> Applied to 2014, but not more than line 2a			82,471	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .				
<b>d</b> Applied to 2015 distributable amount. . . . .				16,029
<b>e</b> Remaining amount distributed out of corpus	0			
<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		0		
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b. . . . .				
<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. . . . .				
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions. . . . .				
<b>e</b> Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions. . . . .				
<b>f</b> Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015. . . . .				69,251
<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). . . . .				
<b>8</b> Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions). . . . .				
<b>9</b> Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a. . . . .		0		
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2011. . . . .				
<b>b</b> Excess from 2012. . . . .	0			
<b>c</b> Excess from 2013. . . . .	0			
<b>d</b> Excess from 2014. . . . .	0			
<b>e</b> Excess from 2015. . . . .	0			

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

<b>1a</b> 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>b</b> Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)				
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed. . . . .				
<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				
(1) Value of all assets. . . . .				
(2) 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				
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties). . . . .				
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .				
(3) Largest amount of support from an exempt organization				
(4) Gross investment income				

**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) )

**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)				
<b>a Paid during the year</b> See Additional Data Table				
<b>Total</b>			► 3a	98,500
<b>b Approved for future payment</b>				
<b>Total</b>			► 3b	

**Part XVI-A Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b> Program service revenue					
a					
b					
c					
d					
e					
f					
<b>g</b> Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments. . . . .					
<b>3</b> Interest on savings and temporary cash investments. . . . .					
<b>4</b> Dividends and interest from securities. . . . .			14	45,145	
<b>5</b> Net rental income or (loss) from real estate					
a Debt-financed property. . . . .					
b Not debt-financed property. . . . .					
<b>6</b> Net rental income or (loss) from personal property. . . . .					
<b>7</b> Other investment income. . . . .					
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .			18	-39,163	
<b>9</b> Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory					
<b>11</b> Other revenue a					
b					
c					
d					
e					
<b>12</b> Subtotal Add columns (b), (d), and (e). . . . .				5,982	
<b>13</b> <b>Total</b> .Add line 12, columns (b), (d), and (e). . . . . (See worksheet in line 13 instructions to verify calculations.)			13	5,982	

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



**Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation**

<b>(a)</b> Name and address	<b>(b)</b> Title, and average hours per week <b>(b)</b> devoted to position	<b>(c)</b> Compensation <b>(If not paid, enter -0-)</b>	Contributions to employee benefit plans and deferred compensation <b>(d)</b>	<b>(e)</b> Expense account, other allowances
TIRSO DEL JUNCO M D 3110 MAIN STREET SANTA MONICA, CA 90405	PRESIDENT/DIRECTOR 0	0		
PETER F MCANDREWS ESQ 3110 MAIN STREET SANTA MONICA, CA 90405	VP/DIRECTOR 0	0		
MAUREEN MINEHAN NEGLIA 3110 MAIN STREET SANTA MONICA, CA 90405	DIRECTOR 0	0		
WILLIAM REGAN 3110 MAIN STREET SANTA MONICA, CA 90405	DIRECTOR 0	0		
MARILYN SHIPMAN 3110 MAIN STREET SANTA MONICA, CA 90405	DIRECTOR 0	0		
WILLIAM LA BELLE 3110 MAIN STREET SANTA MONICA, CA 90405	SECRETARY/TREASURER 0	0		
HARRY W FRAZEE 3110 MAIN STREET SANTA MONICA, CA 90405	DIRECTOR 0	0		
DALLAS E MARVIL 3110 MAIN STREET SANTA MONICA, CA 90405	DIRECTOR 0	0		
STEVEN R PINGEL 3110 MAIN STREET SANTA MONICA, CA 90405	DIRECTOR 0	0		
LILA ROSE 3110 MAIN STREET SANTA MONICA, CA 90405	DIRECTOR 0	0		
JAMES J SALZ M D 3110 MAIN STREET SANTA MONICA, CA 90405	DIRECTOR 0	0		
SISTER PAULA VANDEGAER S S S 3110 MAIN STREET SANTA MONICA, CA 90405	DIRECTOR 0	0		
LOUISE VALLE 3110 MAIN STREET SANTA MONICA, CA 90405	DIRECTOR 0	0		

**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 Paid during the year</b>				
KNIGHTS OF COLUMBUS 11967 SUNSET BOULEVARD LOS ANGELES, CA 90049	N/A	PC	HELP FOR THE NEEDY AND POOR, HELP FOR DISABLED VETERANS, ASSISTANCE WITH TUITION SUPPORT FOR NEEDY STUDENTS ATTENDING CATHOLIC SCHOOLS	10,000
INTERNATIONAL LIFE SERVICES 2601 1/2 WEST 8TH STREET LOS ANGELES, CA 900573810	N/A	PC	TO HELP PROMOTE JUDEO-CHRISTIAN VALUES APPLIED TO FAMILY LIFE, SECUALITY, AND BIOETHICAL ISSUES	20,000
ST MARGARET'S CENTER 27 Hackett Blvd Albany, NY 12208	N/A	PC	TO HELP NURSING FACILITY PROVADING SHORT-TERM, LONG-TERM, AND REPITE CARE TO CHILDREN AND YOUNG ADULTS WITH COMPLEX MEDICAL NEEDS	12,500
LIVE ACTION 2200 Wilson Blvd Suite 102 111 Arlington, VA 222013324	N/A	PC	TO HELP WITH EDUCATION PROGRAMS SUPPORTED BY LIVE ACTION	20,000
GOOD SHEPHERD SHELTER 2561 VENICE BLVD LOS ANGELES, CA 90019	N/A	PC	HELP FOR THE UNDERPRIVILEGED, GENERAL FUND	10,000
LITTLE SISTERS OF THE POOR 2100 SOUTH WESTERN AVE SAN PEDRO, CA 907324331	N/A	PC	HELP FOR THE UNDERPRIVILEGED, GENERAL FUND	15,000
NAZARETH HOUSE 3333 MANNING AVENUE LOS ANGELES, CA 90064	N/A	PC	HELP FOR THE UNDERPRIVILEGED, GENERAL FUND	11,000
<b>Total. . . . .</b>			► 3a	98,500

## TY 2015 Accounting Fees Schedule

**Name:** Queen of Angels California Foundation

**EIN:** 95-6071172

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	25,584	25,584		

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

## TY 2015 Depreciation Schedule

**Name:** Queen of Angels California Foundation

**EIN:** 95-6071172

## TY 2015 Investments Corporate Bonds Schedule

**Name:** Queen of Angels California Foundation

**EIN:** 95-6071172

Name of Bond	End of Year Book Value	End of Year Fair Market Value
CORPORATE OBLIGATIONS	215,057	215,057
DOMESTIC MUTUAL FUNDS	27,382	27,382
PREFERRED SECURITIES	0	0

## TY 2015 Investments Corporate Stock Schedule

**Name:** Queen of Angels California Foundation

**EIN:** 95-6071172

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
CORPORATE EQUITIES	560,958	560,958
DOMESTIC MUTUAL FUNDS	121,260	121,260
INTERNATIONAL MUTUAL FUNDS	237,747	237,747
REAL ESTATE INVESTMENT TRUSTS	84,860	84,860
REAL ASSET FUNDS	75,744	75,744
COMPLEMENTARY STRATEGIES	145,397	145,397

## TY 2015 Other Expenses Schedule

**Name:** Queen of Angels California Foundation

**EIN:** 95-6071172

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK CHARGES	75	75		
OFFICE SUPPLIES	94	94		
MEETING EXPENSES	154	154		
POSTAGE EXPENSE	31	31		
INVESTMENT EXPENSES	28	28		

## TY 2015 Other Increases Schedule

**Name:** Queen of Angels California Foundation

**EIN:** 95-6071172

Description	Amount
UNREALIZED GAIN LOSS	-60,432

## TY 2015 Other Professional Fees Schedule

**Name:** Queen of Angels California Foundation

**EIN:** 95-6071172

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT ADVISORY FEES	21,115	21,115		

## TY 2015 Taxes Schedule

**Name:** Queen of Angels California Foundation**EIN:** 95-6071172

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES PAID	1,307	1,307		
TAXES PAID	3,406	3,406		



Queen of Angels  
Clinic &  
Research Foundation

Office of the Secretary  
221 North Garland Avenue  
Los Angeles, CA 90028

163 N. Occidental Blvd. • Los Angeles, California 90028

Directive for Application for Grant

The Foundation is a nonprofit corporation, incorporated in 1960 in the state of California. It manages four funds. They are:

1) The General Fund

This fund is utilized for operational expenses, and is restricted to general purposes such as: medical education; medical research; paramedical, technical and nursing education; public education; medical service to the public, especially to needy persons; and assistance to treatment and medical education centers in capital equipment projects. Assistance to needy persons usually is through agencies serving them.

2) The Coster Fund

Its resources are limited to activities proscribed by the General Fund, and must apply to cancer.

3) The Foley Fund

Historically, this fund has been confined to medical education, medical research, and medical services, principally focused on medical schools. Its uses conform to the Foundation's objectives. Its donors currently make recommendations for grants from its resources.

4) Mary Adams Balmi Fund

Directives for assignment from this fund are being formulated, and will correspond to the Foundation's objectives.

----- 0 -----

Applications for grants may require consideration for three to six months before decisions are made.

----- 0 -----

Applications for grants will be considered when the following requirements for information have been satisfactorily fulfilled.

- 1) Complete identity of the organization, institution or individual seeking the grant:

Name:

Address: (If mailing address is different, specify)

Telephone:

Ext:

Name of person most familiar with details of the request.

Is there an IRS identification number?

Is this a nonprofit agency (corporation, club, and association)?

- 2) Principal activity of the requester.

- 3) Describe purpose of the requested grant, and how it will be utilized. (Is this a new service or project, or one already established?)

- 4) Describe how this project, and specifically this grant, will be of benefit to the general public.

- 5) What grant is requested. Amit \$

- 6) How does the requested grant apply to the overall expenditures of the project or service?

- 7) How much of the total budgeted expenditures for the project already have been received, or pledged, and from whom?

- 8) What are the starting dates of the project? (Be specific; if there are possibilities of delay, or abandonment of the enterprise, give details.)

- 9) What time schedule, as it pertains to the requested grant, is envisaged? List specific dates as to when the requested funds will actually be used.

- 10) Describe and enumerate any particular sections of society who will especially benefit through the requested grant.

- 11) Describe and enumerate any sections of society in the general service area of this project who, for any reason, will be unable or ineligible to benefit from such a grant. (This specifically applies to age, sex, ethnic, racial and religious groupings.)

- 12) Describe any benefits that will accrue as a result of this project and the proposed grant to citizens of other nations, particularly neighboring and Latin American countries.
- 13) What studies have been made of future growth of this project or service, and needs for future funding.
- 14) Identify the persons of primary responsibility connected with the request of the grant.
  - A) List chief executive officers, directors, trustees;
  - B) List the person or persons and the specific departments (clinics, boards, committees, etc.) to be most responsible for utilizing the requested grant.
- 15) Include any other information considered by the requester to be pertinent to the application.

#### Summary

An elaborate presentation is not requested. What is sought is a brief, concise, factual statement of what is needed, why it is needed, when it is needed, how and when it will be used, by whom, for whom, where, and to what extent.

Mail your statement, with a covering letter if it is desired, to:

Queen of Angels Clinic & Research Foundation  
122 N. Occidental Blvd.  
Los Angeles, California 90026

Address only revised January 26, 1999

QUEEN OF ANGELS CALIFORNIA FOUNDATION  
EIN: 95-6071172  
AMENDED FORM 990PF, RETURN OF PRIVATE FOUNDATION  
YEAR ENDED 12/31/2015

REASON FOR AMENDED RETURN:

The 990PF as originally filed did not properly report all Grants made in 2015.

There were three (3) disbursements made prior to December 31, 2015, for which the checks were not presented for payment until January 2016.

These disbursements, totaling \$36,000, are now properly reported as Grants made in the current year on this tax return.