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Form **990-PF**Department of the Treasury
Internal Revenue Service**Return of Private Foundation**
or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

2015

Open to Public Inspection

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▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For calendar year 2015 or tax year beginning , 2015, and ending , 20

Name of foundation BLEY STEIN FOUNDATION		A Employer identification number 95-6200100
Number and street (or P.O. box number if mail is not delivered to street address) 1624 W OLIVE AVENUE SUITE A		B Telephone number (see instructions) (818) 843-1744
City or town, state or province, country, and ZIP or foreign postal code BURBANK, CA 91506		C If exemption application is pending, check here <input type="checkbox"/>
G 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
H Check type of organization: <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Other taxable private foundation		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 1,773,109	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input 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))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received (attach schedule)	71,373			
2	Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
3	Interest on savings and temporary cash investments				
4	Dividends and interest from securities	17,969	17,969	17,969	
5a	Gross rents	66,933	66,933	66,933	
b	Net rental income or (loss)				
6a	Net gain or (loss) from sale of assets not on line 10	100,319			
b	Gross sales price for all assets on line 6a 294,478				
7	Capital gain net income (from Part IV, line 2)		100,319		
8	Net short-term capital gain			7,334	
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	256,594	185,221	92,236	
13	Compensation of officers, directors, trustees, etc.				
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
16a	Legal fees (attach schedule) STM107	1,221	1,221	1,221	
b	Accounting fees (attach schedule) STM108	900	900	900	
c	Other professional fees (attach schedule)				
17	Interest				
18	Taxes (attach schedule) (see instructions) STM110	748	748	748	
19	Depreciation (attach schedule) and depletion STM126	4,262	4,262	4,262	
20	Occupancy				
21	Travel, conferences, and meetings				
22	Printing and publications				
23	Other expenses (attach schedule) STM103	15,842	15,842	15,842	
24	Total operating and administrative expenses. Add lines 13 through 23	22,973	22,973	22,973	0
25	Contributions, gifts, grants paid	117,550			117,550
26	Total expenses and disbursements. Add lines 24 and 25	140,523	22,973	22,973	117,550
27	Subtract line 26 from line 12				
a	Excess of revenue over expenses and disbursements	116,071			
b	Net investment income (if negative, enter -0-)		162,248		
c	Adjusted net income (if negative, enter -0-)			69,263	

For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2015)

625 14

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	97,463	123,474	123,474
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U S and state government obligations (attach schedule)			
	b Investments - corporate stock (attach schedule) STM137	802,416	896,738	1,149,635
	c Investments - corporate bonds (attach schedule)			
	11 Investments - land, buildings, and equipment basis ▶			
Less: accumulated depreciation (attach schedule) ▶				
12 Investments - mortgage loans				
13 Investments - other (attach schedule)				
14 Land, buildings, and equipment: basis ▶ 216,230				
Less: accumulated depreciation (attach schedule) ▶ STM119 90,391	130,101	125,839	500,000	
15 Other assets (describe ▶)				
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	1,029,980	1,146,051	1,773,109	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ STM121)	12,886	12,886	
	23 Total liabilities (add lines 17 through 22)	12,886	12,886	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. <input checked="" type="checkbox"/>			
	24 Unrestricted	1,017,094	1,133,165	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. <input type="checkbox"/>			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg, and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 Total net assets or fund balances (see instructions)	1,017,094	1,133,165	
	31 Total liabilities and net assets/fund balances (see instructions)	1,029,980	1,146,051	

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	1,017,094
2 Enter amount from Part I, line 27a	2	116,071
3 Other increases not included in line 2 (itemize) ▶	3	
4 Add lines 1, 2, and 3	4	1,133,165
5 Decreases not included in line 2 (itemize) ▶	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	1,133,165

Part IV Capital Gains and Losses for Tax on Investment Income

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 74,191		46,796	27,395
b 24,542		17,208	7,334
c 195,745		130,155	65,590
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			27,395
b			7,334
c			65,590
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	100,319
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	7,334

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 the 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	134,650	1,443,542	0.093278
2013	126,300	1,265,638	0.099792
2012	96,125	1,284,508	0.074834
2011	74,650	962,048	0.077595
2010	84,576	967,317	0.087434

2 Total of line 1, column (d)	2	0.432932
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	0.086586
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5	4	1,746,923
5 Multiply line 4 by line 3	5	151,259
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	1,622
7 Add lines 5 and 6	7	152,881
8 Enter qualifying distributions from Part XII, line 4 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.	8	117,550

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)		1	3,245
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			
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2	0
3 Add lines 1 and 2		3	3,245
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5	3,245
6 Credits/Payments			
a 2015 estimated tax payments and 2014 overpayment credited to 2015	6a 1,200		
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d		7	1,200
8 Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached		8	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	2,045
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	
11 Enter the amount of line 10 to be: Credited to 2016 estimated tax Refunded		11	

Part VII-A Statements Regarding Activities

	Yes	No
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?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? 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		X
c Did the foundation file Form 1120-POL for this year?		X
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? If "Yes," attach a detailed description of the activities		X
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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
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?		X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
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? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

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		X
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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <u>N/A</u>	13	X	
14	The books are in care of ▶ <u>RONALD B STEIN</u> Telephone no ▶ <u>818-843-1744</u> Located at ▶ <u>1624 W OLIVE AVENUE SUITE A, BURBANK, CA</u> ZIP+4 ▶ <u>91506</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041-Check here and enter the amount of tax-exempt interest received or accrued during the year	15		<input type="checkbox"/>
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 the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶	16	Yes	No
				X

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)? <input type="checkbox"/>	1b	
Organizations relying on a current notice regarding disaster assistance check here ▶ <input type="checkbox"/>		
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? <input type="checkbox"/>	1c	X
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 ▶ _____		
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) <input type="checkbox"/>	2b	X
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ _____		
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) <input type="checkbox"/>	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
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	X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions) ☐ Yes ☒ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? ☐ Yes ☒ No

Organizations relying on a current notice regarding disaster assistance check here ☐

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☒ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

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

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

If "Yes" to 6b, file Form 8870

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

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
RONALD B STEIN 1624 W OLIVE AVENUE SUITE A, CA 91506	TRUSTEE 0.00	0	0	0
THOMAS D SICILIANO JR. 1624 W OLIVE AVENUE SUITE A, CA 91506	TRUSTEE 0.00	0	0	0

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

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 ☐

0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶

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.)

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	1,121,075
b	Average of monthly cash balances	1b	102,451
c	Fair market value of all other assets (see instructions)	1c	550,000
d	Total (add lines 1a, b, and c)	1d	1,773,526
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	1,773,526
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	26,603
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,746,923
6	Minimum investment return. Enter 5% of line 5	6	87,346

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	87,346
2a	Tax on investment income for 2015 from Part VI, line 5	2a	3,245
b	Income tax for 2015 (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	3,245
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	84,101
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	84,101
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	84,101

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	117,550
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	117,550
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	Adjusted qualifying distributions. Subtract line 5 from line 4	6	117,550

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				84,101
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only				
b Total for prior years:				
3 Excess distributions carryover, if any, to 2015:				
a From 2010	37,658			
b From 2011	7,065			
c From 2012	32,925			
d From 2013	63,473			
e From 2014	63,638			
f Total of lines 3a through e	204,759			
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ 117,550				
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)				
d Applied to 2015 distributable amount				84,101
e Remaining amount distributed out of corpus	33,449			
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	238,208			
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 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016				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)	37,658			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	200,550			
10 Analysis of line 9				
a Excess from 2011	7,065			
b Excess from 2012	32,925			
c Excess from 2013	63,473			
d Excess from 2014	63,638			
e Excess from 2015	33,449			

4942(j)(5)

(4) Gross investment income

[illegible]

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**

<div>Recipient</div> <div>Name and address (home or business)</div>	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
a Paid during the year JEWISH NATIONAL FUND 42 EAST 69TH STREET NEW YORK, NY 10021	NONE	PC	DONATION	3,000
JEWISH FEDERATION 6905 WHILSHIRE BLVD LOS ANGELES, CA 90048	NONE	PC	DONATION	35,000
AMERICAN JEWISH COMMITTEE 9911 W PICO BLVD SUITE 1602 LOS ANGELES, CA 90035	NONE	PC	DONATION	10,000
SKIRBALL CULTURAL CENTER 2701 N SEPULVEDA LOS ANGELES, CA 90049	NONE	PC	DONATION	10,000
UCSF FOUNDATION 500 PARNASSUS SAN FRANCISCO, CA 94122	NONE	PC	DONATION	10,000
ANTI DEFAMATION LEAGUE 605 THIRD AVENUE NEW YORK, NY 10158	NONE	PC	DONATION	5,000
MAZON JEWISH RESPONSE 10495 SANTA MONICA BLVD SUITE 100 LOS ANGELES, CA 90025	NONE	PC	DONATION	1,000
PLANNED PARENTHOOD 434 WEST 33RD STREET NEW YORK, NY 10001	NONE	PC	DONATION	1,000
Total			<div>▶ 3a</div>	
b Approved for future payment				
Total			<div>▶ 3b</div>	

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
PACIFIC LEGAL FOUNDATION 3900 LENANE DRIVE SUITE 300 SACRAMENTO, CA 95834	NONE	PC	DONATION	600
AMERICAN THYROID ASSOC 6066 LEESBURG PIKE SUITE 550 FALLS CHURCH, VA 22041	NONE	PC	DONATION	1,000
JEWISH BIG BROTHERS 6505 WILSHIRE BLVD SUITE 600 LOS ANGELES, CA 90048	NONE	PC	DONATION	500
SIGMA ALPHA MU 9245 N MERIDIAN SUITE 105 INDIANAPOLIS, IN 46260	NONE	PC	DONATION	500
UC BERKELEY BOX 774 BERKELEY, CA 94701	NONE	PC	DONATION	500
AFRICAN WILDLIFE 1400 16TH STREET NW SUITE 120 WASHINGTON, DC 20036	NONE	PC	DONATION	300
HEAL THE BAY 1444 9TH STREET SANTA MONICA, CA 90401	NONE	PC	DONATION	300
LA COUNTY MUSEUM OF ART 5905 WILSHIRE BLVD LOS ANGELES, CA 90036	NONE	PC	DONATION	300
Total			3a	
b Approved for future payment				
Total			3b	

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
LA PHILHARMONIC 151 SOUTH GRAND LOS ANGELES, CA 90012	NONE	PC	DONATION	300
MIDNIGHT MISSION 601 SOUTH SAN PEDRO STREET LOS ANGELES, CA 90014	NONE	PC	DONATION	300
MUSIC CENTER 135 N GRAND AVENUE SUITE 201 LOS ANGELES, CA 90012	NONE	PC	DONATION	250
STAND WITH US BOX 341069 LOS ANGELES, CA 90034	NONE	PC	DONATION	250
JEWISH FOUNDATION FOR THE RIGHTEOUS 305 7TH AVENUE NEW YORK, NY 10001	NONE	PC	DONATION	250
PHYSICIANS AID ASSOCIATION 1840 S GAFFEY STREET SUITE 467 SAN PEDRO, CA 90731	NONE	PC	DONATION	200
CROSSTOWN ENDOCRINE CLUB 1624 W OLIVE AVENUE SUITE A BURBANK, CA 91506	NONE	NC	DONATION	5,000
Total			3a	85,550
b Approved for future payment				
Total			3b	

Enter gross amounts unless otherwise indicated

(See worksheet in line 13 instructions to verify calculations)

[illegible]

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

2015

Name of the organization

BLEY STEIN FOUNDATION

Employer identification number

95-6200100

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)() (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or 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 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year. ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization BLEY STEIN FOUNDATION	Employer identification number 95-6200100
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RONALD B. STEIN 1624 W. OLIVE AVENUE, SUITE A BURBANK, CA 91506	\$ 105,999	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2	DOUGLAS B STEIN TRUST 1624 W OLIVE AVENUE, SUTIE A BURBANK, CA 91506	\$ 25,571	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization

BLEY STEIN FOUNDATION

Employer identification number

95-6200100

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>1</u>	STOCK _____ _____ _____	\$ 105,999	12-21-2015
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>2</u>	STOCK _____ _____ _____	\$ 25,571	12-31-2015
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	\$ _____	_____

Federal Supporting Statements**2015 PG01**

Name(s) as shown on return

FEIN

BLEY STEIN FOUNDATION

95-6200100

FORM 990PF - PART II - LINE 22

STATEMENT #121

OTHER LIABILITIES SCHEDULE

<u>DESCRIPTION</u>	<u>BOY AMOUNT</u>	<u>EOY AMOUNT</u>
SECURITY DEPOSIT-NORTH'S BAKERY	<u>2,750</u>	<u>2,750</u>
TOTAL	<u><u>2,750</u></u>	<u><u>2,750</u></u>

FORM 990PF - PART II - LINE 22

PG02
STATEMENT #121OTHER LIABILITIES SCHEDULE

<u>DESCRIPTION</u>	<u>BOY AMOUNT</u>	<u>EOY AMOUNT</u>
SNAPBACKMEDIA DEPOSIT	<u>10,136</u>	<u>10,136</u>
TOTAL	<u><u>10,136</u></u>	<u><u>10,136</u></u>

Federal Supporting Statements

2015 PG01

Name(s) as shown on return

FEIN

BLEY STEIN FOUNDATION

95-6200100

FORM 990PF - PART II - LINE 10(B)
INVESTMENTS: CORPORATE STOCK SCHEDULE

STATEMENT #137

<u>CATEGORY</u>	<u>BOY</u>	<u>BOOK VALUE</u>	<u>EOY FMV</u>
BANK OF AMERICA	67,627	67,627	126,225
APPLE INC.	58,155	68,552	47,367
CORNING, INC.	97,241	97,241	98,090
CHURCH & DWIGHT	25,669	25,669	33,952
MICROSOFT, INC.	12,405	12,405	27,740
ORACLE CORPORATION	16,317	20,783	62,101
S & P 500 INDEX	23,508		
BECTON DIXON	30,901	61,861	92,454
FORD STOCK	26,607	30,583	32,407
ISHARES IWN	6,646		
S & P MDY	78,237		
3 M CORPORATION	35,008	65,819	78,333
ABBOTT ALBS	9,396	9,548	12,710
ALLERGAN, INC.	8,470	13,262	13,438
APPLE, INC.	9,567	9,567	15,578
BARD C & R INCORPORATED	9,103	7,586	14,208
BECTON DICKINSON	11,456	10,448	17,566
CHURCH & DWIGHT	19,091	18,967	26,143
CITRIX	9,684		
CONCHO RESOURCES	6,872	6,872	5,850
CONTINENTAL RESOURCES	4,519		
COSTCO WHSL	8,661	8,817	13,889
DISCOVERY COMMUN	5,822		
EBAY	7,661		
ECOLAB INC	10,423	10,423	15,098
EXPRESS SCRIPTS HOLDINGS	11,928	11,928	17,482
HAIN CELESTIAL	7,897	9,427	11,350
HEALTHCARE SVC GROUP	9,989	9,989	14,122
KIMBERLEY CLARK	7,316	7,541	10,439
MASTERCARD	8,662	7,280	13,728
AKAMAI		15,689	10,947
PEPSICO INC.	12,831	12,831	16,687
AKORN		19,948	16,491
QUALCOMM INC.	10,667	10,667	8,098
SALIX PHARMACEUTICALS	10,531		
STARBUCKS CORP	10,448	7,455	15,848
STERICYCLE	11,688	11,688	13,869
THE CHARLES SCHWAB CO	5,946	5,946	11,229
VERIZON COMM	6,133	6,133	5,778
WELLS FARGO INC	9,566	9,566	13,862
WHOLE FOOD MARKET	8,047	8,047	6,298
ZOETIS INC.	9,606	9,492	15,143
3M COMPANY	7,671	7,671	10,997
NIELSON NV	12,692	12,692	12,862
DIAMONDBACK ENERGY	7,601	7,601	5,753

Federal Supporting Statements

2015 PG02

Name(s) as shown on return

FEIN

BLEY STEIN FOUNDATION

95-6200100

FORM 990PF - PART II - LINE 10(B)
INVESTMENTS: CORPORATE STOCK SCHEDULE

STATEMENT #137

<u>CATEGORY</u>	<u>BOY</u>	<u>BOOK VALUE</u>	<u>EOY FMV</u>
CUBIST PHARMACEUTICALS	12,467		
BIOGEN		14,208	12,867
HANESBRANDS		13,300	11,389
LAB CO OF AMER HLDG		11,452	11,128
PAYPAL		7,830	8,616
SYNOPSYS		8,351	8,027
FDT-CITIGROUP		20,514	20,700
FDT-WELLS FARGO	21,684	47,514	54,360
FDT-MASTERCARD		35,948	58,416
TOTALS	<u>802,416</u>	<u>896,738</u>	<u>1,149,635</u>

Federal Supporting Statements

2015 PG01

Your Social Security Number

95-6200100

Name(s) as shown on return

BLEY STEIN FOUNDATION

STATEMENT #103~

FORM 990PF - PART I - LINE 23 - OTHER EXPENSES SCHEDULE

DESCRIPTION	REVENUE AND EXPENSES	NET INVESTMENT	ADJUSTED NET INCOME	CHARITABLE PURPOSE
BOOKKEEPING	798	798	798	0
OFFICE SUPPLIES & EXPENSE	188	188	188	0
MANAGEMENT-AMI	3,183	3,183	3,183	0
PROPERTY INSURANCE	1,946	1,946	1,946	0
LICENSES & PERMITS	62	62	62	0
MANAGEMENT FEES	1,968	1,968	1,968	0
REAL ESTATE TAXES	5,913	5,913	5,913	0
GARDENING	28	28	28	0
WORKERS COMP	15	15	15	0
REPAIRS AND MAINTENANCE	1,741	1,741	1,741	0
TOTALS	15,842	15,842	15,842	0

PG01

STATEMENT #107~

FORM 990PF - PART I - LINE 16(A) - LEGAL FEES SCHEDULE

DESCRIPTION	REVENUE AND EXPENSES	NET INVESTMENT	ADJUSTED NET INCOME	CHARITABLE PURPOSE
LEGAL FEES	1,221	1,221	1,221	0
TOTALS	1,221	1,221	1,221	0

Federal Supporting Statements

2015 PG01

Your Social Security Number

95-6200100

Name(s) as shown on return

BLEY STEIN FOUNDATION

STATEMENT #108~

FORM 990PF - PART I - LINE 16(B) - ACCOUNTING FEES SCHEDULE

DESCRIPTION	REVENUE AND EXPENSES	NET INVESTMENT	ADJUSTED NET INCOME	CHARITABLE PURPOSE
ACCOUNTING FEES	900	900	900	0
TOTALS	900	900	900	0

PG01

STATEMENT #110~

FORM 990PF - PART I - LINE 18 - TAXES SCHEDULE

DESCRIPTION	REVENUE AND EXPENSES	NET INVESTMENT	ADJUSTED NET INCOME	CHARITABLE PURPOSE
STATE TAXES	85	85	85	0
FEDERAL TAXES	663	663	663	0
TOTALS	748	748	748	0

Federal Supporting Statements

2015 PG01

Name(s) as shown on return

Your Social Security Number

BLEY STEIN FOUNDATION

95-6200100

STATEMENT #119~

FORM 990PF - PART II - LINE 14 - LAND ETC. SCHEDULE

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	END OF YEAR BOOK VALUE	FMV
LAND	50,000		50,000	50,000
BUILDING	166,230	90,391	75,839	450,000
TOTAL	216,230	90,391	125,839	500,000

PG01

STATEMENT #126

FORM 990PF - PART I - LINE 19 - DEPRECIATION SCHEDULE

DESCRIPTION	DATE ACQUIRED 10-14-1994	COST OR OTHER BASIS	PRIOR YEAR DEPRECIATION	COMPUTATION METHOD	RATE	LIFE	CURRENT YEAR DEPRECIATION	NET INVESTMENT INCOME	ADJUSTED NET INCOME
BUILDING		166,230	86,129	SL	2.564	39	4,262	4,262	4,262
TOTALS		166,230	86,129				4,262	4,262	4,262