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# OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its instructions is at <u>www.irs.gov/form990pf</u>.

Inspection

For	caler	ndar year 2015, or tax year beginning 09-0	01-2015	, and ending C	8-31-2016			
	e of four	ndation FAMILY FOUNDATION		A Employer id	entification numb	er		
51	EINBEKG	FAMILY FOUNDATION		88-0509331				
Num	ber and :	street (or P O box number if mail is not delivered to street address)	Room/suite	BTelephone nu	mber (see instruction	ns)		
		DRIVE SUITE 200		(702) 240-1232	(702) 240-1232			
		state or province, country, and ZIP or foreign postal code IV 89128		C If exemption	application is pendir	ng, check here		
<b>c</b> C l	2001 211	that apply   Finitial return   Finitial return of a	formar public charity					
<b>G</b> Cr	теск ап	that apply   Initial return   Initial return of a     Final return   TAmended return	former public charity	D 1. Foreign o	rganızatıons, check h	ere •		
		Address change Name change		2. Foreign o	rganizations meeting	the 85%		
					k here and attach co undation status was			
	, ,	pe of organization		under sectio	n 507(b)(1)(A), che			
		et value of all assets at end JAccounting method	✓ Cash		ation is in a 60-mont	th termination		
of۱	year <i>(fr</i>	om Part II, col (c),	be on cash basis )		n 507(b)(1)(B), ched			
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessaily equal the amounts in column (a) (see	Revenue and expenses per	Net investment (b) income	Adjusted net	Disbursements for charitable purposes		
		instructions))	(a) books		,	(d) (cash basis only)		
	1	Contributions, gifts, grants, etc , received (attach						
		schedule)	102,240					
	2	Check ► ☐ If the foundation is <b>not</b> required to						
		attach Sch B						
	3	Interest on savings and temporary cash investments						
	4	Dividends and interest from securities	4,947	4,947				
	5a	Gross rents	,	,				
	ь	Net rental income or (loss)						
ne	6a	Net gain or (loss) from sale of assets not on line 10	-5,417					
Reverkie	ь	Gross sales price for all assets on line 6a 67,377						
Re	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)	-127	0				
	12	Total.Add lines 1 through 11	101,643	4,947				
	13	Compensation of officers, directors, trustees, etc	0	0		0		
	14	Other employee salaries and wages						
ses	15	Pension plans, employee benefits						
en.	16a 		<b>API</b> 5 250	E 250		0		
Expenses	Ь	Accounting fees (attach schedule)	5,250			0		
Administrative	17	Other professional fees (attach schedule)  Interest	100	100		0		
rat	18	Taxes (attach schedule) (see instructions)	652	0		0		
<u> </u>	19	Depreciation (attach schedule) and depletion	_					
Ē	20	Occupancy						
Ă	21	Travel, conferences, and meetings						
and	22	Printing and publications						
Ç.	23	Other expenses (attach schedule)						
Operating	24	Total operating and administrative expenses.				1		
) Ser.		Add lines 13 through 23	6,002	5,350		0		
ŏ	25	Contributions, gifts, grants paid	93,052			93,052		
	26	Total expenses and disbursements. Add lines 24 and						
		25	99,054	5,350		93,052		
	27	Subtract line 26 from line 12						
	a .	Excess of revenue over expenses and disbursements	2,589					
	b	Net investment income (if negative, enter -0-)		0		-		
	c	<b>Adjusted net income</b> (if negative, enter -0 -)	I		I	1		

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  (a) Book Value	End o  (b) Book Value	f year (c) Fair Market Value
1	Cash—non-interest-bearing	(a) DOOK Value	(B) Book value	(C) Fall Market Value
2	Savings and temporary cash investments	30,476	3,844	3,844
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			
် ရ	Prepaid expenses and deferred charges			
5) 9 10a	Investments—U S and state government obligations (attach			
4	schedule)			
b	Investments—corporate stock (attach schedule)	55,755	85,200	165,225
С	Investments—corporate bonds (attach schedule)			
11	Investments—land, buildings, and equipment basis ▶			
	Less accumulated depreciation (attach schedule) ▶			
12	Investments—mortgage loans			
13	Investments—other (attach schedule)			
14	Land, buildings, and equipment basis ▶			
	Less accumulated depreciation (attach schedule) ▶			
15	Other assets (describe ▶)			
16	<b>Total assets</b> (to be completed by all filers—see the			
	ınstructions Also, see page 1, item I)	86,231	89,044	169,069
17	Accounts payable and accrued expenses			
18	Grants payable			
19	Deferred revenue			
19   19   20   21	Loans from officers, directors, trustees, and other disqualified persons			
[ 21	Mortgages and other notes payable (attach schedule)			
22	O ther liabilities (describe ▶)			
23	Total liabilities(add lines 17 through 22)	0	0	
<u>ν</u>	Foundations that follow SFAS 117, check here			
ဥ	and complete lines 24 through 26 and lines 30 and 31.			
24 25	Unrestricted			
	Temporarily restricted			
26 26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here			
5	and complete lines 27 through 31.		_	
<del>န</del> ္မ 27	Capital stock, trust principal, or current funds	0	0	
ASSets 28 29 29	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	Retained earnings, accumulated income, endowment, or other funds	86,231	89,044	
30 E	Total net assets or fund balances(see instructions)	86,231	89,044	
31	Total liabilities and net assets/fund balances(see instructions)	86,231	89,044	
Part II	Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year—Part II, column (			
_	, 3 1 , , , ,			86,231
2	Enter amount from Part I, line 27a			2,589
3	Other increases not included in line 2 (itemize)		3	224
4 -	Add lines 1, 2, and 3			89,044
5	Decreases not included in line 2 (itemize)		- <u>5</u>	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Pa	art II, column (b), lir		89,044
			101	m <b>990-PF</b> (2015)

the Part VI instructions

FCII GF	Capital Gaills	and Losses i	OI TAX OII TIIVE	stillelit Ilicollie			
	List and describe (a) 2-story brick ware	` ' '	roperty sold (e g , re non stock, 200 shs	•	How acquired P—Purchase (b) D—Donation	Date acquired (c) (mo , day, yr )	Date sold (d) (mo , day, yr )
1 a	500 SHS BANK OF A	MERICA				2006-12-08	2015-09-25
b	500 SHS BANK OF A	MERICA				2006-12-08	2015-12-22
С	150 SHS JPMORGAI	N CHASE				1993-01-18	2015-09-25
d	150 SHS JPMORGAI	N CHASE				1993-01-18	2015-12-22
e	500 SHS ALTRIA GF	ROUP				2015-11-12	2016-05-24
(e	) Gross sales price	(f)	Depreciation allowe (or allowable)		or other basis expense of sale		or (loss) (f) minus (g)
а		7,938			25,830		-17,892
b		8,509			25,830		-17,321
С		9,190			2,04	7	7,143
d		9,813			2,04	7	7,766
e	;	31,927			17,040		14,887
Со	mplete only for assets s	howing gain in d	column (h) and owne	d by the foundation	on 12/31/69	Gains (Col	(h) gain minus
(i)	FMV as of 12/31/69	(:	Adjusted basis <b>j)</b> as of 12/31/69		ess of col (ı) col (j), ıf any	col (k), but no	t less than -0-) <b>or</b> from col (h))
а							-17,892
b							-17,321
С							7,143
d							7,766
e							14,887
3	Capital gain net incol Net short-term capita If gain, also enter in l in Part I, line 8	al gain or (loss)	as defined in sectio		in Part I, line 7	3	-5,417
Part '	V Qualification l	Inder Sectio	n 4940(e) for R	educed Tax on	Net Investme	nt Income	
Ifsectio	ional use by domestic pon 4940(d)(2) applies, l	eave this part b	lank	` '		·	┌ Yes 🗸 No
If"Yes,	" the foundation does n	ot qualify under	section 4940(e) Do	o not complete this	part		
<b>1</b> Ent	er the appropriate amo	unt ın each colu	mn for each year, se	ee instructions befo	re making any ent	ies	
	(a) period years Calendar or tax year beginning in)		( <b>b)</b> fying distributions	(c) Net value of nonchan	itable-use assets	(d) Distributio (col (b) divideo	n ratio
	2014		90,200		106,611		0 846067
	2013		120,139		182,815		0 657162
	2012		51,662		94,290		0 547905
	2011		130,692		57,825		2 260130
	2010		152,640		71,958	1	2 121237
2	<b>Total</b> of line 1, column				<u> </u>	2	6 432501
3	A verage distribution the number of years t	he foundation ha	as been in existence	e if less than 5 year	s , , , ,	3	1 286500
4	Enter the net value of				<u> </u>	4	173,101
5	Multiply line 4 by line				<u> </u>	5	222,694
6	Enter 1% of net inves	,	•	•	<u> </u>	6	0
7	Add lines 5 and 6.					7	222,694
8	Enter qualifying distr	butions from Pa	rt XII, line 4			8	93,052

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

Pai	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst	ructio	ns)			
1a						
	and enter "N/A" on line 1  Date of ruling or determination letter					
	(attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0		
	here ► Tand enter 1% of Part I, line 27b · · · · · · · · · · · · · · · · · · ·					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)					
Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)						
3	Add lines 1 and 2			0		
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			0		
6	C redits/Payments					
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 810					
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			810		
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  from 2220 is attached					
9	Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed 9					
10	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10			810		
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ 810 Refunded ▶ 11			0		
Par	t VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No		
	ıt participate or intervene in any political campaign?	<b>1</b> a		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 <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials					
	published or distributed by the foundation in connection with the activities	_				
	Did the foundation file <b>Form 1120-POL</b> for this year?	<b>1</b> c		No		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
_	(1) On the foundation $\blacktriangleright$ \$ 0 (2) On foundation managers $\blacktriangleright$ \$ 0					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					
,	on foundation managers > \$0  Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		No		
2	If "Yes," attach a detailed description of the activities			No		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles					
3	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?			No		
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	4b				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		No		
	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	Ī				
	<ul> <li>By language in the governing instrument, or</li> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions</li> </ul>					
	that conflict with the state law remain in the governing instrument?	6	Yes			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c),		163			
•	and Part XV	7	Yes			
<b>8</b> a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	►NV					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney	٠.	,			
_	General (or designate) of each state as required by General Instruction G? If "No," attach explanation.	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)?  If "Yes," complete Part XIV	9		No		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			110		
	and addlesses	10		No		

Par	t VII-A Statements Regarding Activities (continued)			age •
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?	13	Yes	
	Website address ►N/A			
14	The books are in care of ▶DAVID L STEINBERG Telephone no ▶(703)	2)240-	1232	
	Located at ▶7301 PEAK DRIVE SUITE 200 LAS VEGAS NV ZIP+4 ▶89128			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here		▶ □	_
	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		Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	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 ▶			
Pai	t 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>1</b> a	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?	ļ		ļ
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			ļ
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	ļ		ļ
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)? $\square$ Yes $\square$ No			
	(6) A gree to pay money or property to a government official? (Exception. Check "No"			
	ıf 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 ) Yes 🔽 No			ļ
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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
r	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,	1		I
·	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))			
а	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?	ļ		ļ
	If "Yes," list the years ▶ 20			
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)	١		
	to allyears listed, answer "No" and attach statement—see instructions )	2b		
С	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			
За	▶ 20, 20, 20, 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
Ja	any time during the year?			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation	i	! 	<u> </u>
J	or disqualified persons after May 26, 1969, <b>(2)</b> 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>4</b> a	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	L	No

Form **990-PF** (2015)

# Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see

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5

5

Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4

Distributable Amount

Part XI

(see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations check here ► and do not complete this part.)

1 

**2**a

Tax on investment income for 2015 from Part VI, line 5. . . . . .

Income tax for 2015 (This does not include the tax from Part VI). . .

3 Distributable amount before adjustments Subtract line 2c from line 1. . . . . . . . . . . . . . . . 4

Recoveries of amounts treated as qualifying distributions. . . . . . . . . . 5 

6 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . .

7

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

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

Expenses, contributions, qifts, etc —total from Part I, column (d), line 26. . . . . . . . . . . . . 

2 A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

2b

3а 3b

2

4

5

1

2c

3

4

5

6

7

1a

1b

4

5

93,052 93,052

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for Form **990-PF** (2015)

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2,636

8,655

8,655

8,655

8.655

8.655

93,052

n

173,101

	m 990-PF (2015)				Page <b>9</b>
P	art XIII Undistributed Income (see instr	ructions)	,		
		(a)	(b)	(c)	(d)
		Corpus	Years prior to 2014	2014	2015
	Distributable amount for 2015 from Part XI, line 7				8,655
	Undistributed income, if any, as of the end of 2015				
	Enter amount for 2014 only		0		
	Total for prior years 20, 20, 20		0		
	Excess distributions carryover, if any, to 2015 From 2010				
	From 2011				
	From 2012				
	From 2013				
	From 2014 85,511				
f	Total of lines 3a through e	523,900			
4	Qualifying distributions for 2015 from Part				
	XII, line 4 🕨 \$ 93,052				
а	Applied to 2014, but not more than line 2a				0
b	Applied to undistributed income of prior years		0		
	(Election required—see instructions)				
C	Treated as distributions out of corpus (Election	U			
ч	required—see instructions)				8,655
	Remaining amount distributed out of corpus	84,397			-,
	Excess distributions carryover applied to 2015	0			0
3	(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:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	608,297			
b	Prior years' undistributed income Subtract		0		
	line 4b from line 2b		Ů,		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed		0		
d	Subtract line 6c from line 6b Taxable amount		0		
	-see instructions		٩		
е	Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see				
	Instructions				0
f	Undistributed income for 2016 Subtract				
	lines 4d and 5 from line 1 This amount must				
_	be distributed in 2015				-
′	A mounts treated as distributions out of corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election may				
	be required - see instructions)	0			
8	Excess distributions carryover from 2010 not	151,074			
_	applied on line 5 or line 7 (see instructions)	131,074			
9	Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	457,223			
10	Analysis of line 9	<u> </u>			
	Excess from 2011				
	Excess from 2012				
	Excess from 2013 111,506				
d	Excess from 2014 85,511				
e	Excess from 2015 84,397				
	•		<u> </u>		Form <b>990-PF</b> (2015)

	m 990-PF (2015)					Page <b>10</b>
	Part XIV Private Operating Founda				1 9)	
La	If the foundation has received a ruling or detei foundation, and the ruling is effective for 2015					
b	Check box to indicate whether the organizatio	n <u>is a private operat</u>	ing foundation de	scribed in section	☐ 4942(J)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	Tax year Prior 3 years			(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(c) lotal
	year listed					
b	85% of line 2a					
	Qualifying distributions from Part XII, line 4 for each year listed					
d	A mounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in					
	Part X, line 6 for each year listed					
c	"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					
Pā	art XV Supplementary Information (			ie organizatio	n had \$5,000 o	r more in
_	assets at any time during the	e year—see inst	ructions.)			
a	Information Regarding Foundation Managers: List any managers of the foundation who have before the close of any tax year (but only if the				•	ation
	See Additional Data Table					
b	List any managers of the foundation who own 1 ownership of a partnership or other entity) of v		•	, , ,	large portion of the	е
	Information Regarding Contribution, Grant, Gi	ft Loan Scholarshi	n etc Programs:	,		
_						
	Check here ▶ ▼ If the foundation only makes unsolicited requests for funds If the foundation other conditions, complete items 2a, b, c, and	n makes gifts, grant		3		
ā	The name, address, and telephone number or	email address of the	e person to whom	applications shou	ld be addressed	
Ŀ	The form in which applications should be subr	nitted and information	on and materials t	they should includ	e	
	: Any submission deadlines					
,	d Any restrictions or limitations on awards, suc	h as by deodraphica	al areas, charitabl	le fields, kinds of i	nstitutions, or other	-
•	factors	, ggrapino		,		

Form 990-PF (2015)

Part XV Supplementary Information(continued)

Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	A mount				
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution					
a Paid during the year See Additional Data Table	or substantial contributor	Тестристе						
Total	<u> </u>	<del></del>	▶ 3a	93,052				
b Approved for future payment								
Total			▶ 3b					

Enter gross	amounts unless otherwise indicated	Unrelated bu	usiness income	Excluded by section	512, 513, or 514	<b>(e)</b> Related or exempt
<b>1</b> Program	n service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	function income (See instructions)
а						mstructions)
d						
<b>1</b>	and contracts from government agencies					
_	rship dues and assessments					
<b>3</b> Interes	t on savings and temporary cash ments					
<b>4</b> Dividen	nds and interest from securities			14	4,947	
	tal income or (loss) from real estate					
	financed property ebt-financed property					
	ntal income or (loss) from personal					
	ty					
<b>7</b> Other II	nvestment income					
	(loss) from sales of assets other than			18	-5,417	
	ome or (loss) from special events					
<b>10</b> Gross p	profit or (loss) from sales of inventory					
<b>11</b> Otherr	evenue <b>a</b> BUCKEYE PARTNERS, L P					-127
b						
с						
	al Add columns (b), (d), and (e)		,		-470	4.2-
	dd line 12, columns (b), (d), and (e)				L <b>3</b>	-127 -597
(See w	orksheet in line 13 instructions to verify	calculations )				
Part XVI	-B Relationship of Activities to					
Line No. ▼	Explain below how each activity for wh the accomplishment of the foundation's instructions )					
4	INVESTMENT INCOME					
8	SALE OF SECURITIES IN ORDER TO C	CONTRIBUTE C	ASH			
11	INVESTMENT INCOME OR LOSS FROM	M PASS-THROL	JGH - DISPOSED	IN PRIOR YEAR		

Part	XVII	Information Ro Noncharitable					saction	s and	Relationsh	ips With			
sect	ion 5	rganization directly or i 01(c) of the Code (othe										Yes	No
-	nızatı						- <b>.</b>						
		from the reporting four									1a(1)		No
		rassets									1a(2)		No
		nsactions									(-/		
(1)	Sales	s of assets to a noncha	rıtable ex	empt orgai	nızatıor	1					1b(1)		No
(2)	Purc	hases of assets from a	noncharit	able exem	pt orga	nızatıon					1b(2)		No
(3)	Rent	al of facilities, equipme	nt, or othe	rassets.							1b(3)		No
(4)	Reım	bursement arrangemer	nts								1b(4)		No
		s or loan guarantees.									1b(5)		No
<b>(6)</b> P	erfor	mance of services or m	iembers hij	o or fundra	ıısıng s	olicitations					1b(6)		No
	_	f facilities, equipment,	-	· ·	-						<b>1</b> c		No
of th	e god ny tra	wer to any of the above ods, other assets, or se nsaction or sharing arr (b) Amount involved	rvices giv angement	en by the , show in c	reportii olumn	ng foundation 1	f the fou f the god	indation ods, othe	received less	than fair mark ervices receiv	et value ed	!	nts
		, ,	. ,				, ,		· · · · · · · · · · · · · · · · · · ·	,			
des d <b>√</b> N	ribed o	ndation directly or indiding section 501(c) of the complete the following (a) Name of organization	ne Code (d schedule		section	-	ın secti				·	es	
								$\perp$					
								_					
Sign Here	the	er penalties of perjury, best of my knowledge a rmation of which prepar *****	and belief,	it is true,	correct					than taxpaye May t returr	r) is bas the IRS di	sed on	all
	•	Signature of officer or t	rustee			Date	— <b>y</b>	Title		below	he prepa nstr )?	_	
<b></b> 1		Print/Type preparer's KIMBERLY N BLOC CPA		Preparer	's Sign	ature	Date		Check if sel employed ▶		007992	203	_
Paid Prepa Use	rer	Firm's name ► RSM US LLP					•		Firm's EIN	► 42-071432	25		
Only		Firm's address ► 300 SOUTH 4TH STF NV 89101	REET SUI	ΓΕ <b>12</b> 00 L	AS VE	GAS,			Phone no (	702) 759-40	0 0		

Form 990PF Part XV Line 1a - 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).

contributed more than \$5,000).

DAVID L STEINBERG

BETSI D STEINBERG

Form 990PF Part XV Line 3 - Gr	I		1	
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	A mount
a Paid during the year				
AUDREY MERKIN SCHOLARSHIP FUND 10700 HAVENWOOD LANE LAS VEGAS,NV 89135		501(C)(3) ORGANIZATI	TO ENABLE JEWISH TEENAGERS TO PARTICIPATE IN THE ANNUAL MARCH OF THE LIVING PROGRAM	500
JEWISH FAMILY SERVIECE AGENCY 4794 S EASTTERN AVE LAS VEGAS,NV 89119		501(C)(3) ORGANIZATI	TO SUPPORT LOCAL JEWISH COMMUNITY	360
JEWISH FEDERATION OF LAS VEGAS 2317 RENAISSANCE DRIVE LAS VEGAS,NV 89119		501(C)(3) ORGANIZATI	TO SEEK & DEVELOP JEWISH CONTINUITY IN LAS VEGAS	12,500
KENYON COLLEGE 106 COLLEGE PARK DRIVE GAMBIER,OH 43002		501(C)(3) ORGANIZATI	TO OFFER A RANGE OF VITAL JEWISH EXPERIENCES FOR YOUTH	8,000
ROSEMAN UNIVERSITY OF HEALTH SCIENCES 10530 DISCOVERY DRIVE LAS VEGAS,NV 89135		501(C)(3) ORGANIZATI	TO SUPPORT THE COLLEGE OF MEDICINE	12,809
SUN VALLEY SUMMER SYMPHONY PO BOX 1914 SUN VALLEY,ID 83353		501(C)(3) ORGANIZATI	TO SUPPORT SUMMER MUSICAL WORKSHOPS	2,500
TEMPLE BETH SHOLOM 10700 HAVVENWOOD LANE LAS VEGAS,NV 89135		501(C)(3) ORGANIZATI	TO SUPPORT EDUCATIONAL AND RELIGIOUS PROGRAMS	19,978
THE GREENWOOD SCHOOL 14 GREENWOOD LANE PUTNEY,VT 05346		501(C)(3) ORGANIZATI	TO SUPPORT EDUCATIONAL PROGRAMS	2,000
TRAUMA INTERVENTION CENTER 500 N CASINO CENTER BLVD LAS VEGAS,NV 89101		501(C)(3) ORGANIZATI	TO SUPPORT REHABILITATION PROGRAMS	250
UCLA MEDICAL ALUMNI ASSOCIATION 10920 WISHIRE BOULEVARD SUITE 1400 LOS ANGELES,NV 90024		501(C)(3) ORGANIZATI	TO SUPPORT TEACHING AND LEARNING CENTER FOR HEALTH SCIENCES	1,000
WOOD RIVER JEWISH COMMUNITY 471 N LEADVILLE AVE 2 KETCHUM,ID 83340		501(C)(3) ORGANIZATI	TO ESTABLISH A GATHERING PLACE IN THE WOOD RIVER VALLEY FOR THE MEANINGFUL EXPRESSION OF JEWISH IDENTITY, VALUES, IDEALS, AND FELLOWSHIP	840
SUNDANCE INSTITUTE PO BOX 684429 PARK CITY,UT 84068		501(C)(3) ORGANIZATI	TO PROVIDE AND PROTECT THE SPACE FOR INDEPENDENT STORYTELLERS TO CREATE UNIQUE AND PROVOCATIVE FILMS, DOCUMENTARIES, NEW-MEDIA PROJECTS, AND PLAYS	5,000
KEEP MEMORY ALIVE 888 W BONNEVILLE AVE LAS VEGAS, NV 89106		501(C)(3) ORGANIZATI	TO CONTINUE MAKING A CRITICAL DIFFERENCE IN OUR MISSION OF ASSISTING THE FAMILIES AND CAREGIVERS AFFECTED BY NEURODEGENERATIVE DISEASES	11,000
THE CENTER 401 S MARYLAND PKWY LAS VEGAS,NV 89101		501(C)(3) ORGANIZATI	TO PROVIDE VALUABLE PROGRAMS AND SERVICESTO THE LGBTQ COMMUNITY OF SOUTHERN NEVADA	500
JDFR 8542 SOUTH FORT APACHE ROAD SUITE 100 LAS VEGAS,NV 89146		501(C)(3) ORGANIZATI	TO WORK TOWARD A CURE, BETTER TREATMENTS, AND PREVENTIONFOR TYPE 1 DIABETES	3,655
Total			▶ 3a	93,052

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient  Name and address (home or	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount			
business)	or substantial contributor						
<b>a</b> Paid during the year							
THE SMITH CENTER 361 SYMPHONU PARK AVENUE LAS VEGAS, NV 89106		501(C)(3) ORGANIZATI	OUR MISSION IS TO PROVIDE AND PRESERVE A HIGH-QUALITY PERFORMING ARTS CENTER THAT IS EMBRACED BY THE COMMUNITY AND RECOGNIZED AS A VITAL FORCE BY SUPPORTING ARTISTIC EXCELLENCE, EDUCATION FOR ALL	10,000			
THE HUMAN RIGHTS CAMPAIGN 1640 RHODE ISLAND AVE WASHINGTON,DC 20036		501(C)(4) ORGANIZATI	TO WORK TO ACHIEVE LGBTQ EQUALITY	1,200			
JEWISH COMMUNITY CENTER OF SOUTHERN NEVADA 8689 WEST SAHARA AVE SUITE 180 LAS VEGAS,NV 89117		501(C)(3) ORGANIZATI	TO HELP CHILDREN ATTEND SUMMER CAMP PROGRAMS	360			
AVODAH THE JEWISH SERVICE CORPS 45 WEST 36TH STREET 8TH FLOOR NEW YORK, NY 10018		501(C)(3) ORGANIZATI	TO STRENGTHEN THE JEWISH COMMUNITY'S FIGHT AGAINST THE CAUSES AND EFFECTS OF POVERTY IN THE UNITED STATES	500			
SOUTHWESTERN SECTION PGA FOUNDATION 10685 N 69TH STREET SCOTTSDALE, AZ 85254		501(C)(3) ORGANIZATI	TO PROMOTE THE GOODWILL AND GROWTH OF THE GAME OF GOLF WITH AN EMPHASIS ON ACTIVITIES THAT BENEFIT AT-NEED FAMILIES AND CHILDREN	100			
Total			▶ 3a	93,052			

eine dicainire print Do Not i Rocess	A3 I lica Data		DEN 3343101000037
TY 2015 Accounting Fees Scheo	Jule		
Name: S	STEINBERG FAMIL	Y FOUNDATION	

DI N: 93491016000097

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ACCOUNTING FEES

<b>EIN:</b> 88-0509331					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
				1	

5,250

5,250

efile GRAPHIC print - DO NOT PROCESS   As Filed Data -	D	LN: 93491016000097					
TY 2015 Investments Corporate Stock Schedule							
Name: STEINBERG FAMILY FOUN EIN: 88-0509331	DATION						
Name of Stock	End of Year Book Value	End of Year Fair Market Value					
BANK OF AMERICA, CORP	0	0					

85,200

165,225

JPMORGAN CHASE & CO

ALTRIA GROUP

DLN: 93491016000097

-127

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BUCKEYE PARTNERS, LP

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income

-127

ETNI: 00 0500221

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491016000097
TY 2015 Other Increases Sche	dule	
Name:	STEINBERG FAMILY FOUNDATI	ON
EIN:	88-0509331	

# Description Amount

ADJUSTMENT TO INVESTMENTS 22

100

LIST FEES

Name: STEINBERG FAMILY FOUNDATION

DLN: 93491016000097

**EIN:** 88-0509331

ory	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
•	ory	ory Amount		

100

TY 2015 Taxes Schedule	
Name	STEINBERG FAMILY FOUNDATION

DLN: 93491016000097

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2015 ESTIMATED TAX PAYMENT

<b>EIN:</b> 88-0509331				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

652

efile GRAPHIC print -	DO NOT PROCESS	As Filed Data -			DLN: 93491016000097
Schedule B		Schedu	lle of Contributors		OMB No 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	▶ Information ab	► Attach to Form 990, 990-EZ, or 990-PF ► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at  www irs gov/form990			2015
Name of the organization				Employer id	entification number
STEINBERG FAMILY F	OUNDATION			88-050933	31
Organization type (ch	eck one)				
Filers of:	Section:				
Form 990 or 990-EZ	501(c)(_)	(enter number) org	anızatıon		
	─ 4947(a)(1)	nonexempt charita	able trust <b>not</b> treated as a priva	te foundation	
	527 politica	al organization			
Form 990-PF	<b>√</b> 501(c)(3) €	exempt private four	ndation		
	T 4947(a)(1)	nonexempt charita	able trust treated as a private fo	undation	
	─ 501(c)(3) t	axable private four	ndation		
1 *	-		hat received, during the year, co is Land ⊩ See instructions for do		
under sections t received from ai	509(a)(1) and 170(b)(1	)(A)(vi), that chec ing the year, total o	Form 990 or 990-EZ that met the ked Schedule A (Form 990 or 99 contributions of the greater of (1 s I and II	90-EZ), Part II, line 13, 16a	ı, or 16b, and that
during the year,		nore than \$1,000 ex	r (10) filing Form 990 or 990-EZ x <i>clusīvely</i> for religious, charitab lete Parts I, II, and III		
during the year, this box is checl purpose Do not	contributions <i>exclusiv</i> ked, enter here the tota complete any of the p	<i>ely</i> for religious, ch al contributions that arts unless the <b>Ge</b>	r (10) filing Form 990 or 990-EZ naritable, etc , purposes, but no twere received during the year neral Rule applies to this organ more during the year	such contributions totaled for an exclusively religion nization because it receive	I more than \$1,000 If us, charitable, etc , ed <i>nonexclusively</i>
990-EZ, or 990-PF), but	ıt <b>must</b> answer "No" d	on Part IV, line 2, of	e and/or the Special Rules does fits Form 990, or check the box oes not meet the filing requireme	on line H of its	

Name of organization STEINBERG FAMILY FOUNDATION Employer identification number 88-0509331

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional spa	ace is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1			Person
	DR DAVID STEINBERG 1008 CHAMPIONSHIP COURT	\$ 102,240	Payroll
	LAS VEGAS, NV 89134		Noncash 🔽
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
		<u> </u>	Payroll
			Noncash
			(Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	_		Person
		\$	Payroll
	-		Noncash —
			(Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
		_     \$	Payroll
			Noncash —
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
		_	Payroll
			Noncash —
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
			Payroll
		\$	Noncash
			(Complete Part II for noncash contributions)

**Employer identification number** STEINBERG FAMILY FOUNDATION 88-0509331 Noncash Property Part II (see instructions) Use duplicate copies of Part II if additional space is needed (c) (a) (b) (d) FMV (or estimate) Description of noncash property given No.from Part I Date received (see instructions) 2015-11-12 3,000 SHS- ALTRIA GROUP INC MO SECURITIES \$ 170 801 (c) (a) (b) (d) FMV (or estimate) No.from Part I Description of noncash property given Date received (see instructions) (c) (a) (b) (d) FMV (or estimate) No.from Part I Description of noncash property given Date received (see instructions) (c) (b) (a) (d) FMV (or estimate) Description of noncash property given No.from Part I Date received (see instructions) (c) (a) (b) (d) FMV (or estimate) No.from Part I Description of noncash property given Date received (see instructions) (c) (b) (d) (a) FMV (or estimate) No.from Part I Description of noncash property given Date received (see instructions)

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)