

For calendar year 2016, or tax year beginning 01-01-2016, and ending 12-31-2016

Name of foundation ANGELICA FOUNDATION		A Employer identification number 33-0632647	
Number and street (or P O box number if mail is not delivered to street address) 1688 CERRO GORDO		Room/suite	B Telephone number (see instructions) (505) 955-1491
City or town, state or province, country, and ZIP or foreign postal code SANTA FE, NM 87501		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		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input 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 type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 3,600,469		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)			

Part I Analysis of Revenue and Expenses (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)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	265,471			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	40,578	40,578		
	4 Dividends and interest from securities	16,102	16,102		
	5a Gross rents	128,046	128,046		
	b Net rental income or (loss) 65,067				
	6a Net gain or (loss) from sale of assets not on line 10	13,337			
	b Gross sales price for all assets on line 6a 19,079				
	7 Capital gain net income (from Part IV, line 2)		13,337		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	15,883	14,899		
	12 Total. Add lines 1 through 11	479,417	212,962		
	13 Compensation of officers, directors, trustees, etc	82,250	16,450		65,800
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits	17,361	3,473		13,889
	16a Legal fees (attach schedule)	1,271	1,271		0
	b Accounting fees (attach schedule)	8,742	4,371		4,371
	c Other professional fees (attach schedule)	36,766	19,391		17,375
	17 Interest	34,463	34,463		0
	18 Taxes (attach schedule) (see instructions)	13,853	8,817		5,036
	19 Depreciation (attach schedule) and depletion	25,544	17,774		
	20 Occupancy	11,718	0		11,718
	21 Travel, conferences, and meetings	53,094	0		53,094
	22 Printing and publications				
	23 Other expenses (attach schedule)	102,884	60,997		41,887
	24 Total operating and administrative expenses. Add lines 13 through 23	387,946	167,007		213,170
	25 Contributions, gifts, grants paid	346,455			346,455
	26 Total expenses and disbursements. Add lines 24 and 25	734,401	167,007		559,625
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-254,984			
	b Net investment income (if negative, enter -0-)		45,955		
c Adjusted net income (if negative, enter -0-)					

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	589,636	481,539	481,539
	2 Savings and temporary cash investments	136,173	138,574	138,574
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____	2,035		
	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) ▶ _____ 250,000 Less allowance for doubtful accounts ▶ _____ 0	250,000	250,000	250,000
	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)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ _____ 796,112 Less accumulated depreciation (attach schedule) ▶ _____ 182,184	610,738	613,928	613,928
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	1,968,557	1,907,828	1,907,828
	14 Land, buildings, and equipment basis ▶ _____ 350,221 Less accumulated depreciation (attach schedule) ▶ _____ 141,621	199,600	208,600	208,600
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	3,756,739	3,600,469	3,600,469	
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 ▶ _____)	499,910	510,499	
	23 Total liabilities (add lines 17 through 22)	499,910	510,499	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	0	0	
	28 Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29 Retained earnings, accumulated income, endowment, or other funds	3,256,829	3,089,970	
30 Total net assets or fund balances (see instructions)	3,256,829	3,089,970		
31 Total liabilities and net assets/fund balances (see instructions) .	3,756,739	3,600,469		

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	3,256,829
2 Enter amount from Part I, line 27a	2	-254,984
3 Other increases not included in line 2 (itemize) ▶ _____	3	90,357
4 Add lines 1, 2, and 3	4	3,092,202
5 Decreases not included in line 2 (itemize) ▶ _____	5	2,232
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	3,089,970

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 See Additional Data Table			
b			
c			
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 See Additional Data Table			
b			
c			
d			
e			

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

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	13,337
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	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries


(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015	465,653	3,495,389	0 133219
2014	607,646	3,427,585	0 177281
2013	592,581	3,372,092	0 175731
2012	698,903	3,170,115	0 220466
2011	599,413	4,143,030	0 144680
2 Total of line 1, column (d)			2 0 851377
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 170275
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5			4 3,514,653
5 Multiply line 4 by line 3			5 598,458
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 460
7 Add lines 5 and 6			7 598,918
8 Enter qualifying distributions from Part XII, line 4			8 559,625

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 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)		
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	919
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	919
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	919
6	Credits/Payments		
a	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	3,041
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	3,041
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	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	2,122
11	Enter the amount of line 10 to be Credited to 2017 estimated tax <input type="checkbox"/> 2,122 Refunded <input type="checkbox"/>	11	0

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?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ 0 (2) On foundation managers <input type="checkbox"/> \$ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	Yes
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	Yes
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> NM, CA		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	8b	Yes
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> 	10	Yes

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 WWW ANGELICAF FOUNDATION ORG	13	Yes	
14	The books are in care of THE ORGANIZATION Telephone no (505) 955-1491			

Located at **1688 CERRO GORDO SANTA FE NM** ZIP+4 **87501**

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year 15			
16	At any time during calendar year 2016, 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.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(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 checked="" type="checkbox"/> Yes <input 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	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		No
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016? <input type="checkbox"/>	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions) <input type="checkbox"/>	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2016 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 2016). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	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))? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Provide a grant to an individual for travel, study, or other similar purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	5b		
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? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If "Yes" to 6b, file Form 8870</i>	6b		No
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7b		

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

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				

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

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

Total number of other employees paid over \$50,000. ☐ Yes ☒ No

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. ►		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
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 ►	0

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	127,726
b	Average of monthly cash balances.	1b	460,094
c	Fair market value of all other assets (see instructions).	1c	2,980,356
d	Total (add lines 1a, b, and c).	1d	3,568,176
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	3,568,176
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	53,523
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	3,514,653
6	Minimum investment return. Enter 5% of line 5.	6	175,733

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	175,733
2a	Tax on investment income for 2016 from Part VI, line 5.	2a	919
b	Income tax for 2016 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	919
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	174,814
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	174,814
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	174,814

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	559,625
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	
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	559,625
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	559,625

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 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				174,814
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2016				
a From 2011.	392,261			
b From 2012.	541,407			
c From 2013.	429,198			
d From 2014.	440,569			
e From 2015.	293,359			
f Total of lines 3a through e.	2,096,794			
4 Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ 559,625				
a Applied to 2015, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2016 distributable amount.				174,814
e Remaining amount distributed out of corpus	384,811			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,481,605			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
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.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2015 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 2017				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).	0			
8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions).	392,261			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	2,089,344			
10 Analysis of line 9				
a Excess from 2012.	541,407			
b Excess from 2013.	429,198			
c Excess from 2014.	440,569			
d Excess from 2015.	293,359			
e Excess from 2016.	384,811			

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling. ▶

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

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

	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e 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					
a "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					

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)				
a <i>Paid during the year</i> See Additional Data Table				
Total			3a	346,455
b <i>Approved for future payment</i>				
Total			3b	0

Enter gross amounts unless otherwise indicated

(See worksheet in line 13 instructions to verify calculations)

[illegible]

Part XVII

- d** If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

- | b If "Yes," complete the following schedule | | |
|---|--------------------------|---------------------------------|
| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
| | | |
| | | |
| | | |
| | | |

**Sign
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

May the IRS discuss this return with the preparer shown below
(see instr)? ☒ Yes ☐ No

**Paid
Preparer
Use Only**

Print/Type preparer's name TIMOTHY R REYNOLDS	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN P00535985
Firm's name ▶ RICCI & COMPANY LLC				Firm's EIN ▶ 20-5949532
Firm's address ▶ 6200 UPTOWN BLVD NE STE 400 ALBUQUERQUE, NM 87110				Phone no (505) 338-0800

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

List and describe the kind(s) of property sold (e.g., real estate, (a) 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)
ANGELICA PARTNERS LLC-PER K-1	P	2016-01-01	2016-12-31
ANGELICA PARTNERS LLC-PER K-1	P	2000-01-01	2016-12-31
CLEARWATER CAPITAL IV-PER K-1	P	2016-01-01	2016-12-31
CLEARWATER CAPITAL IV-PER K-1	P	2000-01-01	2016-12-31
CLEARWATER CAPITAL II-PER K-1	P	2000-01-01	2016-12-31
RGC LONGVIEW II LP-PER K-1	P	2000-01-01	2016-12-31

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

(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)
		149	-149
1,994			1,994
17,085			17,085
		2	-2
		5,542	-5,542
		49	-49


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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(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	
			-149
			1,994
			17,085
			-2
			-5,542
			-49


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

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
SUZANNE D GOLLIN 1688 CERRO GORDO RD SANTA FE, NM 87501	DIRECTOR/PRESIDENT 40 00	62,500	0	0
JAMES D GOLLIN 1688 CERRO GORDO RD SANTA FE, NM 87501				
GLADYS SCHMIDT 1688 CERRO GORDO RD SANTA FE, NM 87501	DIRECTOR/SEC/TREAS 10 00	19,750	0	0
CHRISTOPHER BROWN 1688 CERRO GORDO RD SANTA FE, NM 87501				
NINA ROYAL 1688 CERRO GORDO RD SANTA FE, NM 87501	DIRECTOR 0 00	0	0	0
NANCY HARRIS CAMPBELL 1688 CERRO GORDO RD SANTA FE, NM 87501		0	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)				
a <i>Paid during the year</i>				
ALL SPECIES THE PRESIDIO SAN FRANCISCO, CA 94129	N/A	501(C)3	VARIOUS	2,500
CENTER FOR COMMUNITY CHANGE 1536 U ST NW WASHINGTON, DC 20009	N/A	501(C)3	HEALTH & HUMAN RIGHTS	10,000
CENTRO DE LOS DERECHOS DEL MIGRANTE INC 519 NORTH CHARLES STREET BALTIMORE, MD 21201	N/A	501(C)3	MEXICO PROGRAM	16,000
GIBLER UNKNOWN UNKNOWN MX	N/A	NC	MEXICO PROGRAM	1,000
GLOBAL EXCHANGE 2017 MISSION STREET SUITE 303 SAN FRANCISCO, CA 94110	N/A	501(C)3	HUMAN RIGHTS	12,000
Total 				346,455
3a				

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)				
a <i>Paid during the year</i>				
ASSOCIADOS POR JUSTO (JASS) 2040 SOUTH STREET NW WASHINGTON, DC 20011	N/A	501(C)3	MEXICO PROGRAM	8,000
NEW VENTURE FUND 1201 CONNECTICUT AVE NW 300 WASHINGTON, DC 20036	N/A	501(C)3	HEALTH & HUMAN RIGHTS	2,500
RAIN FOREST ACTION NETWORK 425 BUSH STREET STE 300 SAN FRANCISCO, CA 94108	N/A	501(C)3	VARIOUS	10,030
SANTA FE FILM FESTIVAL PO BOX 2167 SANTA FE, NM 87504	N/A	501(C)3	VARIOUS	10,000
SANTA FE WATERSHED ASSOCIATION 1413 SECOND STREET SUITE 3 SANTA FE, NM 87505	N/A	501(C)3	ENDOWMENT NORTH AMERICA	1,000
Total ▶ 3a				346,455

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)				
a <i>Paid during the year</i>				
THRESHOLD FOUNDATION PO BOX 29903 SAN FRANCISCO, CA 941290903	N/A	501(C)3	COMMITTEE POOL PLEDGE	8,050
TIDES FOUNDATION PO BOX 29903 SAN FRANCISCO, CA 94129	N/A	501(C)3	VARIOUS	244,000
VARIOUS UNDER 1000 VARIOUS SANTA FE, NM 87505	N/A	501(C)3	VARIOUS	1,375
YANSA 14 CHURCH STREET COLD SPRING, NY 10516	N/A	501(C)3	RENEWABLE ENERGY	20,000
Total 				346,455
3a				

TY 2016 Accounting Fees Schedule**Name:** ANGELICA FOUNDATION**EIN:** 33-0632647

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	8,742	4,371		4,371

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

TY 2016 Depreciation Schedule

Name: ANGELICA FOUNDATION

EIN: 33-0632647

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
LEASING COMMISSIONS-PAN	2006-05-04	20,069	20,069	SL	5 000000000000	0	0		
FURNITURE-Z GALLERIE	2001-11-15	3,715	3,694	SL	7 000000000000	0	0		
FURNITURE- HOME OFFICE+	2001-12-04	5,094	5,094	SL	7 000000000000	0	0		
FURNITURE-Z GALLERIE	2001-12-05	734	734	SL	7 000000000000	0	0		
FURNITURE- SDB CITI	2002-01-07	1,051	975	SL	7 000000000000	0	0		
FURNITURE- HOME OFFICE+	2002-01-12	5,000	4,644	SL	7 000000000000	0	0		
FURNITURE-Z GALLERIE	2002-01-30	734	691	SL	7 000000000000	0	0		
FURNITURE- HOME OFF SOL	2002-01-30	839	790	SL	7 000000000000	0	0		
FURNITURE-Z GALLERIE	2002-02-10	579	546	SL	7 000000000000	0	0		
FURNITURE-FAN DIEGO	2002-03-11	498	474	SL	7 000000000000	0	0		
FURNITURE-SADDLEBACK	2002-03-11	5,839	5,560	SL	7 000000000000	0	0		
FURNITURE-ARTRAGEOUS	2002-03-26	574	554	SL	7 000000000000	0	0		
FURNITURE-ARTISANOS IMP	2002-04-02	521	500	SL	7 000000000000	0	0		
FURNITURE- WARM HEARTH	2002-04-20	2,799	2,733	SL	7 000000000000	0	0		
FURNITURE-ARTISANOS	2002-04-30	1,300	1,271	SL	7 000000000000	0	0		
FURNITURE-ARTISANOS	2002-05-22	1,318	1,300	SL	7 000000000000	0	0		
FURNITURE-ARTISANOS	2002-07-11	422	422	SL	7 000000000000	0	0		
HOME OFFICE SOLUTIONS	2004-03-26	1,004	966	SL	7 000000000000	0	0		
EQUIPMENT-B&H PHOTO	2003-12-14	1,356	1,356	SL	5 000000000000	0	0		
EQUIPMENT-BEST BUY	2003-12-20	990	990	SL	5 000000000000	0	0		

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
VIDEO CAMERA-BEST BUY	2005-02-25	1,153	1,077	SL	5 000000000000	0	0		
HP LASERVET 2840	2005-12-14	1,388	1,388	SL	5 000000000000	0	0		
EQUIPMENT-AMEX	2005-12-22	1,583	1,583	SL	5 000000000000	0	0		
COMPUTER EQUIP-DELL	2005-04-16	2,152	2,078	SL	5 000000000000	0	0		
COMPUTER EQUIP-DELL	2005-09-13	2,010	2,010	SL	5 000000000000	0	0		
COMPUTER EQUIP-BEST BUY	2005-11-04	905	905	SL	5 000000000000	0	0		
COMPUTER-DELL (GHA)	2005-01-16	1,415	1,298	SL	5 000000000000	0	0		
COMPUTER SERVER/MONITOR	2006-03-27	1,019	1,019	SL	5 000000000000	0	0		
ADDITIONAL SERVER	2006-04-19	1,834	1,819	SL	5 000000000000	0	0		
ADDITIONAL SERVER	2006-05-04	1,104	1,096	SL	5 000000000000	0	0		
COMPUTER EQUIP (FRYS)	2006-04-27	1,086	1,076	SL	5 000000000000	0	0		
DELL LAPTOP (JDG)	2007-02-27	3,146	2,936	SL	5 000000000000	0	0		
COMPUTER - BEST BUY	2007-12-12	1,370	1,370	SL	5 000000000000	0	0		
AUTO	2006-12-13	24,396	24,396	SL	5 000000000000	0	0		
LAND 8532 VAN NUYS BLVD	2000-11-01	225,389		L		0	0		
BUILDING 8532 VAN NUYS BLVD	2000-11-01	275,475	106,829	SL	39 000000000000	7,063	7,063		
FACADE IMPROVEMENTS	2000-12-01	10,562	4,076	SL	39 000000000000	271	271		
FACADE IMPROVEMENTS	2000-12-15	3,657	1,414	SL	39 000000000000	94	94		
TENANT IMPROVEMENTS	2000-12-01	17,306	6,679	SL	39 000000000000	444	444		
TENANT IMPROVEMENTS	2000-12-15	15,064	5,806	SL	39 000000000000	386	386		

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
TENANT IMPROVEMENTS	2000-12-26	15,186	5,851	SL	39 0000000000000	389	389		
TENANT IMPROVEMENTS	2001-05-31	5,191	1,945	SL	39 0000000000000	133	133		
IMPROVEMENTS - REMODEL	2009-01-01	240,668	42,651	SL	39 5000000000000	6,093	0		
AMPLIFIER	2009-01-08	2,675	1,337	200DB	5 0000000000000	0	0		
COMPUTER EQUIP - VIDEO CONVERTER	2009-01-08	1,416	708	200DB	5 0000000000000	0	0		
COMPUTER - BEST BUY	2011-04-18	531		200DB	5 0000000000000	0	0		
COMPUTER - APPLE	2011-05-07	2,190		200DB	5 0000000000000	0	0		
COMPUTER - DELL	2011-06-13	1,148		200DB	5 0000000000000	0	0		
COMPUTER - SDG AMAZON	2011-12-09	2,689		200DB	5 0000000000000	0	0		
COMPUTER EQUIP - APPLE	2011-12-14	1,621		200DB	5 0000000000000	0	0		
OFFICE EQUIP	2011-10-25	649		200DB	5 0000000000000	0	0		
OFFICE EQUIP	2011-12-15	936		200DB	5 0000000000000	0	0		
TENANT IMPROVEMENTS	2001-12-15	100,000	7,692	SL	39 0000000000000	2,564	2,564		
TENANT IMPROVEMENTS	2014-02-11	50,000	2,457	SL	39 0000000000000	1,282	1,282		
TENANT IMPROVEMENTS	2014-04-25	37,250	1,592	SL	39 0000000000000	955	955		
DEBT ISSUANCE COSTS	2016-01-01	16,773		SL	10 0000000000000	1,677	0		
LEASING COMMISSIONS-PAN	2016-01-01	20,964		SL	5 0000000000000	4,193	4,193		

TY 2016 Investments - Land Schedule**Name:** ANGELICA FOUNDATION**EIN:** 33-0632647

Category/ Item	Cost/Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
LAND 8532 VAN NUYS BLVD	225,389	0	225,389	
BUILDING 8532 VAN NUYS BLVD	275,475	113,892	161,583	
FACADE IMPROVEMENTS	10,562	4,347	6,215	
FACADE IMPROVEMENTS	3,657	1,508	2,149	
TENANT IMPROVEMENTS	17,306	7,123	10,183	
TENANT IMPROVEMENTS	15,064	6,192	8,872	
TENANT IMPROVEMENTS	15,186	6,240	8,946	
TENANT IMPROVEMENTS	5,191	2,078	3,113	
TENANT IMPROVEMENTS	100,000	10,256	89,744	
TENANT IMPROVEMENTS	50,000	3,739	46,261	
TENANT IMPROVEMENTS	37,250	2,547	34,703	
LEASING COMMISSIONS-PAN	20,964	4,193	16,771	

TY 2016 Investments - Other Schedule**Name:** ANGELICA FOUNDATION**EIN:** 33-0632647

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
INVESTMENTS IN PARTNERSHIPS	FMV	851,678	851,678
INVESTMENTS /LIMITED LIABILITY COMPANIES	FMV	1,056,150	1,056,150

TY 2016 Land, Etc.
Schedule

Name: ANGELICA FOUNDATION
EIN: 33-0632647

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
FURNITURE-Z GALLERIE	3,715	3,694	21	
FURNITURE- HOME OFFICE+	5,094	5,094	0	
FURNITURE-Z GALLERIE	734	734	0	
FURNITURE- SDB CITI	1,051	975	76	
FURNITURE- HOME OFFICE+	5,000	4,644	356	
FURNITURE-Z GALLERIE	734	691	43	
FURNITURE- HOME OFF SOL	839	790	49	
FURNITURE-Z GALLERIE	579	546	33	
FURNITURE-FAN DIEGO	498	474	24	
FURNITURE- SADDLEBACK	5,839	5,560	279	
FURNITURE- ARTRAGEOUS	574	554	20	
FURNITURE- ARTISANOS IMP	521	500	21	
FURNITURE- WARM HEARTH	2,799	2,733	66	
FURNITURE- ARTISANOS	1,300	1,271	29	
FURNITURE- ARTISANOS	1,318	1,300	18	
FURNITURE- ARTISANOS	422	422	0	
HOME OFFICE SOLUTIONS	1,004	966	38	
EQUIPMENT-B&H PHOTO	1,356	1,356	0	
EQUIPMENT-BEST BUY	990	990	0	
VIDEO CAMERA-BEST BUY	1,153	1,077	76	
HP LASERVET 2840	1,388	1,388	0	
EQUIPMENT-AMEX	1,583	1,583	0	
COMPUTER EQUIP-DELL	2,152	2,078	74	
COMPUTER EQUIP-DELL	2,010	2,010	0	
COMPUTER EQUIP-BEST BUY	905	905	0	
COMPUTER-DELL (GHA)	1,415	1,298	117	
COMPUTER SERVER/MONITOR	1,019	1,019	0	
ADDITIONAL SERVER	1,834	1,819	15	
ADDITIONAL SERVER	1,104	1,096	8	
COMPUTER EQUIP (FRYS)	1,086	1,076	10	

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
DELL LAPTOP (JDG)	3,146	2,936	210	
COMPUTER - BEST BUY	1,370	1,370	0	
AUTO	24,396	24,396	0	
IMPROVEMENTS - REMODEL	240,668	48,744	191,924	
AMPLIFIER	2,675	2,675	0	
COMPUTER EQUIP - VIDEO CONVERTER	1,416	1,416	0	
COMPUTER - BEST BUY	531	531	0	
COMPUTER - APPLE	2,190	2,190	0	
COMPUTER - DELL	1,148	1,148	0	
COMPUTER - SDG AMAZON	2,689	2,689	0	
COMPUTER EQUIP - APPLE	1,621	1,621	0	
OFFICE EQUIP	649	649	0	
OFFICE EQUIP	936	936	0	
DEBT ISSUANCE COSTS	16,773	1,677	15,096	

TY 2016 Legal Fees Schedule**Name:** ANGELICA FOUNDATION**EIN:** 33-0632647

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	1,271	1,271		0

TY 2016 Other Decreases Schedule**Name:** ANGELICA FOUNDATION**EIN:** 33-0632647

Description	Amount
UNREALIZED GAINS AND LOSSES	119
NON-DEDUCTIBLE EXPENSES K-1'S	6
NON-DEDUCTIBLE MEALS AND ENTERTAINMENT	2,107

TY 2016 Other Expenses Schedule**Name:** ANGELICA FOUNDATION**EIN:** 33-0632647**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BOOKKEEPER	25,737	12,869		12,868
OFFICE EXPENSE	2,294	1,147		1,147
INFORMATION TECH EXPENSES	15,136	7,568		7,568
MEALS AND ENTERTAINMENT AT 50%	1,488	0		1,488
PARTNERSHIP DEDUCTIONS	24,949	24,949		0
DUES AND SUBSCRIPTIONS	258	129		129
POSTAGE AND DELIVERY	744	372		372
GRANT/ADMIN FEES	18,212	0		18,212
BANK CHARGES	512	409		103
MANAGEMENT FEES	6,186	6,186		0

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INSURANCE EXPENSE	3,794	3,794		0
REPAIRS	3,574	3,574		0

TY 2016 Other Income Schedule**Name:** ANGELICA FOUNDATION**EIN:** 33-0632647**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
FROM 990-T UBIT	984		984
OTHER PASS-THROUGH INCOME	14,899	14,899	14,899

TY 2016 Other Increases Schedule**Name:** ANGELICA FOUNDATION**EIN:** 33-0632647

Description	Amount
PSHIP BOOK/TAX ADJUSTMENT	40,379
PRIOR YEAR AUDIT ADJUSTMENT	49,978

TY 2016 Other Liabilities Schedule**Name:** ANGELICA FOUNDATION**EIN:** 33-0632647

Description	Beginning of Year - Book Value	End of Year - Book Value
CREDIT CARD PAYABLE	1,054	7,460
SECURITY DEPOSIT- PANORAMA CITY	7,920	16,800
OTHER PAYABLES	632	4,358
DUE TO RABOBANK	490,304	481,881

TY 2016 Other Professional Fees Schedule**Name:** ANGELICA FOUNDATION**EIN:** 33-0632647

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES	2,016	2,016		0
CONSULTING FEES	34,750	17,375		17,375

TY 2016 Substantial Contributors Schedule

Name: ANGELICA FOUNDATION

EIN: 33-0632647

Name	Address
OPEN SOCIETY INSTITUTE	400 WEST 59TH STREET NEW YORK, NY 10019
SIGRID RAUSING TRUST	12 PENZANCE PLACE LONDON W11 4PA UK

TY 2016 Taxes Schedule**Name:** ANGELICA FOUNDATION**EIN:** 33-0632647

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAXES	6,282	1,256		5,026
LICENSES, TAXES, PERMITS	20	10		10
TAXES - OTHER	154	154		0
REAL ESTATE TAXES	7,397	7,397		0

Schedule B (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small>	Schedule of Contributors ▶ 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 <u>www.irs.gov/form990</u>	OMB No 1545-0047 2016
	Name of the organization ANGELICA FOUNDATION	Employer identification number 33-0632647

Organization type (check one)

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

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% 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 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization ANGELICA FOUNDATION	Employer identification number 33-0632647
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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	SIGRID RAUSING TRUST	\$ 245,471	Person <input checked="" type="checkbox"/>
	39 SLOAN STREET		Payroll <input type="checkbox"/>
	LONDON, X9LP UK		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	OPEN SOCIETY INSTITUTE	\$ 20,000	Person <input checked="" type="checkbox"/>
	400 WEST 59TH STREET		Payroll <input type="checkbox"/>
	NEW YORK, NY 10019		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
.		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
.		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
.		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
.		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Employer identification number

33-0632647

Part II

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

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

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Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____ Use duplicate copies of Part III if additional space is needed
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	