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Return of Private Foundation

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

OMB No 1545-0052 2016

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. For calendar year 2016 or tax year beginning 2016, and ending A Employer identification number Name of foundation YIPEEE FAMILY FOUNDATION, INC. 45-3196681 Number and street (or P O box number if mail is not delivered to street address) B Telephone number (see instructions) Room/suite **895 ILLUMINATION PL** City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ▶ □ MILPITAS, CA 95035 ☐ Initial return Initial return of a former public charity G Check all that apply: D 1. Foreign organizations, check here ▶□ Final return □ Amended return 2. Foreign organizations meeting the 85% test, ☐ Address change ☐ Name change check here and attach computation E If private foundation status was terminated under H Check type of organization: Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here ▶□ ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation Fair market value of all assets at J Accounting method: <a> Cash <a> Accrual F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here end of year (from Part II, col. (c), ▶□ Other (specify) line 16) ▶ \$ (Part I, column (d) must be on cash basis.) 305,000 Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily equal expenses per books purposes (cash basis only) the amounts in column (a) (see instructions)) Contributions, gifts, grants, etc., received (attach schedule) 80,500 **O** Check ► ☐ if the foundation is **not** required to attach Sch. B SREVENUED MAR 0 3 Interest on savings and temporary cash investments Dividends and interest from securities . . 5a Net rental income or (loss) Net gain or (loss) rroin sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 7 Net short-term capital gain . 8 Income modifications 10a Gross sales less returns and allowances Less: Cost of goods sold . . . Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) . . 12 Total. Add lines 1 through 11 . 80,50 13 Compensation of officers, directors, trustees, etc. Operating and Administrative Expenses 14 Other employee salaries and wages 9,600 15 Pension plans, employee benefits 16a Legal fees (attach schedule) Accounting fees (attach schedule) Other professional fees (attach schedule) 17 18 Taxes (attach schedule) (see instructions) 3,694 19 Depreciation (attach schedule) and depletion . . . 20 21 Travel, conferences, and meetings . 3,200 22 Printing and publications 800 . . . 23 Other expenses (attach schedule) 10,9000 Total operating and administrative expenses. Add lines 13 through 23 26,494 Contributions, gifts, grants paid 25 5,000 26 Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12: Excess of revenue over expenses and disbursements 47,306 **Net investment income** (if negative, enter -0-) . Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form 990-PF (2016)

47.306

Da	rt II	Ralance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
ΓŒ	LL III	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash-non-interest-bearing	45,429	92,735	
	2	Savings and temporary cash investments			
ſ	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts			
[4	Pledges receivable ►			
Ì		Less: allowance for doubtful accounts ▶			
l	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
1	7	Other notes and loans receivable (attach schedule) ▶			
ĺ		Less: allowance for doubtful accounts ▶			
ध	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
AS	10a	Investments—U.S. and state government obligations (attach schedule)			
[b	Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment. basis ▶			
l		Less: accumulated depreciation (attach schedule) ▶			
1	12	Investments—mortgage loans			
	13	Investments - other (attach schedule)			
l	14	Land, buildings, and equipment: basis ▶ 212,000			
J		Less: accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ►)			
}	16	Total assets (to be completed by all filers—see the			
		ınstructions. Also, see page 1, item l)	257,429	304,735	304,735
	17	Accounts payable and accrued expenses			
ဖ	18	Grants payable			
Ęį	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>e</u>	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ►)			
	23	Total liabilities (add lines 17 through 22)			
Balances		Foundations that follow SFAS 117, check here ▶ □ and complete lines 24 through 26 and lines 30 and 31.			
ä	24	Unrestricted	L		
ā	25	Temporarily restricted			
뭐	26	Permanently restricted			
Net Assets or Fund		Foundations that do not follow SFAS 117, check here ▶ □ and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds	<u> </u>		
ets	28	Paid-ın or capital surplus, or land, bldg., and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds			
¥.	30	Total net assets or fund balances (see instructions)	257,429	304,735	
Ne	31	Total liabilities and net assets/fund balances (see instructions)			
	rt III	Analysis of Changes in Net Assets or Fund Balances	·		
1		al net assets or fund balances at beginning of year-Part II, colu			
		-of-year figure reported on prior year's return)			_ 257,429
2	Ente	er amount from Part I, line 27a		2	47,306
3					
4		l lines 1, 2, and 3			
5	Dec	reases not included in line 2 (itemize) ▶		5	
6	Tota	reases not included in line 2 (itemize) > al net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), lir	ne 30 6	34,735

Part	V Capital Gains and	d Losses for Tax on Investn	nent Income			
		he kind(s) of property sold (e g , real estat use, 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						
<u>b</u>						
<u>C</u>						
<u>d</u>						
<u>e</u>		40 D	(3) (3-4)		(1) (2-)	(!)
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		n or (loss) f) minus (g)
a_						
<u>b</u>					 	
<u>c</u>						
<u>d</u>						
е	Complete only for assets sho	l owing gain in column (h) and owned	by the foundation	on 12/31/69	m 0 (0.	
	Complete only for assets sit	,	, 	s of col (i)		l (h) gain minus t less than -0-) or
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		(j), if any		rom col (h))
a						
b_						
<u>c</u>			<u> </u>			
<u>d</u>			 		 	
<u>e</u> _	 	(If goin	also enter in Pa	rt L lino 7	 	
2	Capital gain net income of		, enter -0- in Pai		2	
3		un or (loss) as defined in sections			[]	
		t I, line 8, column (c) (see instru			[[
		 			3	
Part		der Section 4940(e) for Reduring the foundations subject to the				
Was t		ve this part blank. e section 4942 tax on the distribu t qualify under section 4940(e). [base period?	☐ Yes ☐ No
1	Enter the appropriate am	ount in each column for each ye	ar; see the instru	uctions before m	aking any entries.	
Cal	(a) Base penod years endar year (or tax year beginning ii	(b) Adjusted qualifying distribution	ns Net value o	(c) f nonchantable-use a		(d) tribution ratio divided by col. (c))
	2015					
	2014					
	2013					
	2012					
	2011					
2	_	f)	ride the total on l	line 2 by 5, or by	1	
4	·	ncharitable-use assets for 2016	•			
5	Multiply line 4 by line 3				. 5	
6	Enter 1% of net investme	ent income (1% of Part I, line 27t	o)		. 6	
7	Add lines 5 and 6				. 7	
8	Enter qualifying distribution of line 8 is equal to or green Part VI instructions.	ons from Part XII, line 4	 n Part VI, line 1t	o, and complete	. 8 that part using a	% tax rate. See the

Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see in	nstri	ICTIO	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here \(\bigcup \) and enter "N/A" on line 1.			
b	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions) Domestic foundations that meet the section 4940(e) requirements in Part V, check			
	here ▶ □ and 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).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
3	Add lines 1 and 2			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			
5 6	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			
а	2016 estimated tax payments and 2015 overpayment credited to 2016 6a			
b	Exempt foreign organizations—tax withheld at source 6b			
С	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			
8	Enter any penalty for underpayment of estimated tax. Check here 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			
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . > 10			
Part	Enter the amount of line 10 to be: Credited to 2017 estimated tax ▶ Refunded ▶ 11 VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a	<u> </u>	1
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1b		1
	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.			
С	Did the foundation file Form 1120-POL for this year?	1c		1
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.	Ť		Ė
_	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$	<u>'</u>		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		1
3	If "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		/
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	<u> </u>	✓
b 5	If "Yes," has it filed a tax return on Form 990-T for this year?	4b 5		1
3	If "Yes," attach the statement required by General Instruction T.	-		Ť
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		1
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	1	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶			
	California			
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	OI-		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	8b	✓	
J	4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"			
	complete Part XIV	9		1
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10	<u> </u>	

Part	II-A Statements Regarding Activities (continued)			
			Yes	No
11	t any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	ľ	ł	ì
	neaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		1
12	id the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	erson had advisory privileges? If "Yes," attach statement (see instructions)	12		✓
13	d the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	1	
	Vebsite address ▶	-		
14	he books are in care of ▶ EMIL YIP Telephone no. ▶ 4)8-667	9313	
	ocated at ▶ 895 ILLUMINATION PL, MILPITAS, CA ZIP+4 ▶	9503		
15	ection 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here			▶ □
	nd enter the amount of tax-exempt interest received or accrued during the year			
16	t any time during calendar year 2016, did the foundation have an interest in or a signature or other authorit	· —	Yes	No
	ver a bank, securities, or other financial account in a foreign country?	16		/
	see the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name one foreign country ▶	1		!
Dow				
Par			Yes	No
4.	ile Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		162	NO
1a	During the year did the foundation (either directly or indirectly): 1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes 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)?			
	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.)			
b	any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	ection 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			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	-		
•	vere not corrected before the first day of the tax year beginning in 2016?	1c		
2	axes 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)):			1
•	the end of tax year 2016, did the foundation have any undistributed income (lines 6d and			
а	ie, Part XIII) for tax year(s) beginning before 2016?			
	f "Yes," list the years ▶ 20 , 20 , 20 , 20			1
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			
	Ill years listed, answer "No" and attach statement—see instructions.)	2b		
С	f 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		((
	ıt any tıme durıng the year?			
b	f "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			ł
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of		ŝ	
	he 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	1		
	oundation had excess business holdings in 2016.)	3b	 	├ ─
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		
b	Old 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?	44		
	mantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010.	4b		L

Daga	
raue	٠.

Pari	VII-3 Statements Regarding Activities	for W	<u>/hich Form</u>	4720	May Be R	equire	d (continue	<u>(d)</u>		
5a	During the year did the foundation pay or incur a	ny amo	ount to:						3	
	(1) Carry on propaganda, or otherwise attempt to						☐ Yes 🗹	No		
	(2) Influence the outcome of any specific public		on (see secti	on 495	5); or to ca	arry on,				
	directly or indirectly, any voter registration dri	ve?					☐ Yes 🔽	No	.]	
	(3) Provide a grant to an individual for travel, stud						☐ Yes 🗹	No		
	(4) Provide a grant to an organization other than			_						
	section 4945(d)(4)(A)? (see instructions)							No	•	
	(5) Provide for any purpose other than religious,				-					
	purposes, or for the prevention of cruelty to o							No	13	
p	If any answer is "Yes" to 5a(1)-(5), did any of the							d in		
	Regulations section 53.4945 or in a current notice	-	-		•		_		5b	
_	Organizations relying on a current notice regarding	-						• Ш	·	
С	If the answer is "Yes" to question 5a(4), does to because it maintained expenditure responsibility							1		
			_				☐ Yes ☑	No		
6a	If "Yes," attach the statement required by Regula Did the foundation, during the year, receive any					mume			}	
Va				_		51111U1113		No		
b	Did the foundation, during the year, pay premium					henefit		, 140	6b	
	If "Yes" to 6b, file Form 8870.	is, une	ony or mane.	otiy, oii	a personal	Derient	Contract:	•	0.0	
7a	At any time during the tax year, was the foundation a	a party t	to a prohibited	tax sh	elter transac	tion?	☐ Yes 📝	No		İ
	If "Yes," did the foundation receive any proceeds						ansaction?		7b	
Par	VIII Information About Officers, Direct	tors, 1	rustees, F	ounda	tion Mana	agers,	Highly Paid	d E	mploye	es,
	and Contractors		<u> </u>	_						
1	List all officers, directors, trustees, foundation								,	
	(a) Name and address	hou	e, and average rs per week	` (if r	mpensation iot paid,	emplo	Contributions to yee benefit plan			se account, owances
		devot	ed to position	en	ter -0-)	and defe	erred compensa	tion		
EMIL Y				1	_					_
895 IL	UMINATION PL, MILPITAS, CA 95035	CEU 2	hours/week	 	0			0	<u> </u>	0
				!						
				ł		}			ł	
]						
				<u> </u>		<u></u>			<u></u>	
2	Compensation of five highest-paid employee	s (oth	er than tho	se incl	uded on li	ne 1—:	see instruct	ion	s). If no	ne, enter
	"NONE."				т — —					
		_	(b) Title, and a		()		(d) Contribution employee ben			se account,
	(a) Name and address of each employee paid more than \$50,00	Ю	hours per v		(c) Compe	nsation	plans and defe compensation	rred	other all	lowances
					<u> </u>				<u> </u>	
			\						[
			 						 	
					•		ı		}	
			 							
		_								
	· · · · · · · · · · · · · · · · · · ·		<u> </u>		<u> </u>		<u>L</u> _			
Total	number of other employees paid over \$50,000 .	<u>· · </u>	<u> </u>	· · ·	<u> </u>	<u> </u>	<u> </u>		<u> </u>	-DE (2016)

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
3 Fiv	re highest-paid independent contractors for professional services (see instructions). If none, enter "NO	NE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
		
-		
		
		
		
Total nun	nber of others receiving over \$50,000 for professional services	
Part IX-	A Summary of Direct Charitable Activities	
	oundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of tions and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1		
		İ
		
2		
3		
4		-
Part IX-	B Summary of Program-Related Investments (see instructions)	
	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	. •	1
		<u> </u>
Total. Ad	d lines 1 through 3	1
		r 000_DE /201

Part ₀		ign foundatio	ons,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:	4-	
	Average monthly fair market value of securities	1a	
	Average of monthly cash balances	1b	92,735
C	Fair market value of all other assets (see instructions)	1c	
ď	Total (add lines 1a, b, and c)	1d	92,735
е	Reduction claimed for blockage or other factors reported on lines 1a and		
_	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	92,735
4	Cash deemed held for charitable activities. Enter $1^{1}/_{2}\%$ of line 3 (for greater amount, see	1 . 1	
_	instructions)	4	1,391
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	91,344
6	Minimum investment return. Enter 5% of line 5	6	4,567
Part 2	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations check here ► ☐ and do not complete this part.)	oundations	
1	Minimum investment return from Part X, line 6	1	4,56
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016. (This does not include the tax from Part VI.) 2b		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	4,567
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	4,567
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	4,567
Part	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	33,194
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	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	33,194
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	33,194
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	g whether the	
	qualifies for the section 4940(e) reduction of tax in those years.	-	

art	XIII Undistributed Income (see instruction	ons)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2016 from Part XI,	Corpus	Years prior to 2015	2015	2016
	line 7				A 567
^		_			4,567
2	Undistributed income, if any, as of the end of 2016:				
а	Enter amount for 2015 only			27,782	
b	Total for prior years: 20 13 ,20 14 ,20 15		0		
3	Excess distributions carryover, if any, to 2016:				
а	From 2011				
b	From 2012				
С	From 2013				
d	From 2014				
e	From 2015	}			
f	Total of lines 3a through e	27.702			
4	Qualifying distributions for 2016 from Part XII,	27,782			
7	lim = A · De C				
	30/104				
a	Applied to 2015, but not more than line 2a .				
b	Applied to undistributed income of prior years				
	(Election required—see instructions)				
C	Treated as distributions out of corpus (Election				
	required—see instructions)				
d	Applied to 2016 distributable amount				
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2016	28,627			
	(If an amount appears in column (d), the same	20,027			
	amount must be shown in column (a).)				
6	Enter the net total of each column as				
О	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	56,409			
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b				
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				
d	Subtract line 6c from line 6b. Taxable				
	amount-see instructions				
_	Undistributed income for 2015. Subtract line				
æ	4a from line 2a. Taxable amount—see				
	instructions		ļ		
_					
f	Undistributed income for 2016. Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2017				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section	•			
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)				
8	Excess distributions carryover from 2011 not				
	applied on line 5 or line 7 (see instructions) .				
9	Excess distributions carryover to 2017.				
_	Subtract lines 7 and 8 from line 6a	50 400			
10	Analysis of line 9:	56,409			
	•				
a	Excess from 2012				
b	Excess from 2013				
С	Excess from 2014				
d	Excess from 2015				
е_	Excess from 2016				

	30-PF (2016)					Page 10
Part					9)	
1a	If the foundation has received a ruling	•				
	foundation, and the ruling is effective for		•			
ь	Check box to indicate whether the four		e operating founda		ection 4942(j)(3	3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for each year listed	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
b	85% of line 2a					
С	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					
е	Qualifying distributions made directly for active conduct of exempt activities.					
	Subtract line 2d from line 2c		<u> </u>		<u> </u>	
3	Complete 3a, b, or c for the alternative test relied upon.					
а	"Assets" alternative test-enter					
	(1) Value of all assets	<u>.</u>				<u> </u>
	(2) Value of assets qualifying under					
b	section 4942(j)(3)(B)(i)					
	of minimum investment return shown in Part X, line 6 for each year listed	<u> </u>				
C	"Support" alternative test-enter:		ļ	ļ	1	
	(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				he foundation l	nad \$5,000 or mo	ore in assets at
	any time during the year-		ns.)			
1 a	Information Regarding Foundation List any managers of the foundation of the before the close of any tax year (but of	who have contrib				by the foundation
Emil Y		mily in they have o		ιαι τ φο,σσος: (σσο τ	30001011 001 (4)(2).)	
<u></u> b	List any managers of the foundation					ge portion of the
	ownership of a partnership or other en	inty) or writeri the	nouncation has a	1076 or greater in	ıcıesi.	
None 2	Information Regarding Contribution	Grant Gift La	an Sahalambin a	to Brograma		
-	Check here ▶ ☐ If the foundation		• • • • • • • • • • • • • • • • • • • •	. •	organizations and	does not accept
	unsolicited requests for funds. If the f					
	other conditions, complete items 2a, I		,	,	•	
a	The name, address, and telephone nu	imber or e-mail a	ddress of the pers	on to whom applic	cations should be a	ddressed:
Fmil V	ip, 895 Illumination Place, Milpitas, CA 95	i035				
b	The form in which applications should		d information and	materials they she	ould include:	
	n information describing the purpose and	I function of the re	quester.			
	Any submission deadlines:	- -				
	nber 15 of the year for which a donation is Any restrictions or limitations on av		y geographical a	reas, charitable f	ields, kinds of inst	itutions, or other

Form 9	990-PF (2016)				Page 11
	t.XV Supplementary Information (cont		ad for Ev	tura Davesant	
3	Grants and Contributions Paid During t Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
	Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
а	Paid during the year				
	mane Society, 901 Ames Ave, Milpitas, CA 95035		public	Animal shelters	1,500
2. Chi Drive	rist Community Church, 1000 South Park Victoria		public	Church	3,500
Dive			public	Charon	0,000
			1		
					}
			ļ		
				1	
					İ
					1
	Total				3a 5,000
b	Approved for future payment				
			ŀ		
	Total	<u> </u>	L	<u> </u>	

Рα	rt XVI	-A Analysis of Income-Producing Ac	71171100				
nte	r gross	s amounts unless otherwise indicated.	(a) Business code	(b) Amount	(c) Exclusion code	on 512, 513, or 514 (d) Amount	(e) Related or exempt function income (See instructions.)
1	Progr	ram service revenue:	Dusiness code	Amount	Excidsion code	Amount	(See instructions.)
-	a				1		
	b -						
	~ -						
	<u> </u>			<u> </u>	<u> </u>		
	d _						ļ
	е _						
	f _						
	g Fe	ees and contracts from government agencies				_	
2	Mem	bership dues and assessments			<u>"</u>		
3		st on savings and temporary cash investments					
4		ends and interest from securities			 		
5		ental income or (loss) from real estate:					
•						<u> </u>	
		ebt-financed property			 		<u> </u>
		ot debt-financed property					
6	Net re	ental income or (loss) from personal property					
7	Other	r investment income					
8	Gain o	or (loss) from sales of assets other than inventory					
9		ncome or (loss) from special events					
10		s profit or (loss) from sales of inventory					
11		revenue: a	-		 	·	
••	b	10701100.					
	<u> </u>				 		
	a _			<u></u>			
	e _				ļ		
		otal. Add columns (b), (d), and (e)		<u> </u>			<u></u>
						13	
See	works	sheet in line 13 instructions to verify calculation	ns.)		_	13	
See		sheet in line 13 instructions to verify calculation	ns.)		_	13	
See Pa	works rt XVI e No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	is.) (ccomplishm	ent of Exemp	ot Purposes		mportantly to the
See Pa	works	sheet in line 13 instructions to verify calculation	is.) (ccomplishm	ent of Exemp	ot Purposes		mportantly to the ctions)
See Pa	works rt XVI e No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	is.) (ccomplishm	ent of Exemp	ot Purposes		mportantly to the ctions)
See Pa	works rt XVI e No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	is.) (ccomplishm	ent of Exemp	ot Purposes		mportantly to the ctions)
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See Pa	works rt XVI e No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	is.) (ccomplishm	ent of Exemp	ot Purposes		mportantly to the
See Pa	works rt XVI e No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	is.) (ccomplishm	ent of Exemp	ot Purposes		mportantly to the
See Pa	works rt XVI e No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	is.) (ccomplishm	ent of Exemp	ot Purposes		mportantly to the ctions)
See Pa	works rt XVI e No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	is.) (ccomplishm	ent of Exemp	ot Purposes		mportantly to the ctions)

		Exempt Or	ganizations						
1	ın sec			engage in any of the section 501(c)(3) org				Ye	es No
а	Trans	fers from the rep	porting foundation to	o a noncharitable ex	empt organization	of:			
	(1) C	ash						1a(1)	✓_
	(2) O	ther assets .						1a(2)	1
b	Other	transactions:							
	(1) S	ales of assets to	a noncharitable exe	empt organization				1b(1)	1
				able exempt organiz				1b(2)	1
			, equipment, or othe	, ,				1b(3)	1
			rrangements					1b(4)	+
		oans or loan gua			• • • •			1b(5)	1
		-		nip or fundraising so	iostatione			1b(6)	1
_								1c	+
C				sts, other assets, or s," complete the fol					
d				s, complete the for ces given by the rep					
				ement, show in colu					
(a) Line		b) Amount involved		naritable exempt organiza			transactions, and sh		
(a) Lin	110	b) Amount involved	(c) Name of Honor	iai itable exempt organiza	(u) Descri	phon or transfers, t	arisactions, and sin	aring arrange	- Inches
									
	-+		<u> </u>						
	-+		<u> </u>						
	-+		. <u>.</u>					<u> </u>	
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		·							
				<u> </u>			 -		
	-+	<u> </u>					· · ·		
									
		·	<u> </u>			-			
						_ 			
				- 	_			· <u> </u>	
	lo the	foundation due	actly or undersetly of	filiated with, or relat	ad to one or mor	o toy overnt	organizations		
2a			•	other than section 50		•		☐ Yes ☐	T No
b			e following schedule		71(0)(0)) 01 111 300110	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	[_ res ∟	J 140
	11 10	(a) Name of organ	<u>~</u>	(b) Type of or	manutation	(c)	Description of relation	nehin	
		(a) Name of organ	ization	(b) Type of the	garnzacion		Description of Telation	лапр	
_				<u> </u>		- 	·		
						··			
	Unde	or negalties of perium 1	declare that I have examine	ed this return, including acco	omnanving schedules and	statements and to	the best of my knowle	dae and helia	ef it is true
Sign				an taxpayer) is based on all			ige —		
							May the IRS discuss this return with the preparer shown below		
Here		ature of officer or tru	STOP I	Date	/ CEO			uctions)?	
	July	Print/Type preparer	r's name	Preparer's signature	THE	Date		PTIN	
Paid		, and type preparer	, o number	, ropardi a aignature			Check if self-employed	,,	
Prep						 	<u> </u>		
Use	Only	Firm's name					m's EIN ▶		
_		Firm's address				i Ph	none no		

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

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

OMB No 1545-0047

2016

Employer identification number

TIPEEE FAMILY FOUNDATI	ON, INC 45-319681_				
Organization type (check one):					
Filers of:	Section:				
Form 990 or 990-EZ	√ 501(c)(3) (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	☐ 527 political organization				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
• •	is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See				
General Rule					
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 y or property) from any one contributor. Complete Parts I and II. See instructions for determining a il contributions.				
Special Rules					
regulations under 13, 16a, or 16b, a	on described in section 501(c)(3) filling Form 990 or 990-EZ that met the 331/3 % support test of the r sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line and that received from any one contributor, during the year, total contributions of the greater of (1) of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.				
contributor, durin	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one ago the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, tional 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) filling Form 990 or 990-EZ that received from any 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. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributotaling \$5,000 or more during the year					
Caution: An organization	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,				

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name, of organization Employer identification number

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	EMIL YIP 895 ILLUMINATION PLACE MILPITAS, CA95035	\$42,500	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2	RONGDI TANG 358 CELLEBRATION DRIVE MILPITAS, CA 95035	\$38,000	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		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		

Employer identification number

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

Employer identification number

raitill	(10) that total more than \$1,000 for	the year from any one cont ons completing Part III, ente by year. (Enter this information	tributor. Complete columns (a) through (e) and reference that the total of exclusively religious, charitable, etc., nonce. See instructions.)			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	Transferee's name, address, an	(e) Transfer of gift	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift					
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift					
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					

SCHEDULE-O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization	Employer identification number
YIPEEE FAMILY FOUNDATION, INC.	45-3196681
Part 1, Line 18 : County and city property taxes.	······································
Part 1, Line 23: Internet, telephone, utilities , Association dues, and office expenses.	
I BIT I LIN LO. Altering templicite, addited / Addeditation dues, and office expenses.	
<u></u>	
	
	•••••••••••••••••••••••••••••••••••••••

Schedule O (Form 990 or 990-EZ) (2016)	Page 2
Name of the organization	Employer identification number
	<u> </u>
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	······
	••