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Form **.990-PF**

Return of Private Foundation

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

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

2016

For calendar year 2016 or tax year beginning A Employer identification number Name of foundation THE JOSEPHS FOUNDATION 88-0385101 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 1488 SANTA ANITA DRIVE (702)385-2474City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here LAS VEGAS, NV 89119 G Check all that apply: Initial return Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: X Cash Accrual If the foundation is in a 60-month termination (from Part II, col (c), line 16) Other (specify) under section 507(b)(1)(B), check here 2,456,737. (Part I, column (d) must be on cash basis) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) charitable purposes (cash basis only) expenses per books income income 1 Contributions, gifts, grants, etc., received N/A 2 Check \ if the foundation is not required to attach Sch B interest on savings and temporary cash investments 5 STATEMENT 25,445. 25,445. STATEMENT 4 Dividends and interest from securities 9,934. 9,934. STATEMENT 5a Gross rents Net rental income or (loss) 9,934. 113,931. 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 363,273. 113,931. 1 L 1/2 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain \circ Income modifications 313V 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 149,315. 149,315 12 Total, Add lines 1 through 11 0. Compensation of officers, directors, trustees, etc. Other employee salaries and wages 15 Pension plans, employee benefits Expenses 16a Legal fees 1,665. 0. 1,665. **b** Accounting fees STMT 5 <u>42,583.</u> 42,583. 0. c Other professional fees STMT Operating and Administrative 17 Interest 18 Taxes STMT 6 2,152. 2,152. 0. Depreciation and depletion 14,075. 0 33,135 0. 33,135. 20 Occupancy 21 Travel, conferences, and meetings 520. 520 О. 22 Printing and publications Other expenses 24 Total operating and administrative 80,055 expenses. Add lines 13 through 23 94,130. 108,328. 108,328. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 202,458. 80,055 108,328. Add lines 24 and 25 27 Subtract line 26 from line 12: <53,143. 8 Excess of revenue over expenses and disbursements. 69,260. b Net investment income (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-)

B

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П		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
P	Part II Balance Sheets Column should be for end-of-year amounts only		(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	12,499.	7,927.	7,927.
	2	Savings and temporary cash investments	23,184.	23,190.	23,190.
	3	Accounts receivable			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
ł	_	disqualified persons			
1	7	Other notes and loans receivable			
-	·	Less; allowance for doubtful accounts			
s	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	-	Investments - U.S. and state government obligations			
1		Investments - corporate stock STMT 7	1,161,865.	1,127,039.	1,980,015.
1		Investments - corporate bonds	1,101,003.	1,121,033.	1,000,010.
		Investments - Land, buildings, and equipment basis			
1	"			ļ	
l	10	Less accumulated depreciation			<u>-</u>
- 1		Investments - mortgage loans	· · · · · · · · · · · · · · · · · · ·		
- 1	13	Investments - other			
- 1	14	Land, buildings, and equipment: basis ► 589,112. Less accumulated depreciation STMT 8 ► 143,507.	450 600	44E 60E	44E COE
	4-		459,680.	445,605.	445,605.
- 1		Other assets (describe			
	16	Total assets (to be completed by all filers - see the	1 (57 220	1 (02 761	2 456 727
+		instructions. Also, see page 1, item I)	1,657,228.	1,603,761.	2,456,737.
- 1		Accounts payable and accrued expenses			
- 1	18	Grants payable			
jes	19	Deferred revenue			
75	20	Loans from officers, directors, trustees, and other disqualified persons			
Ej	21	Mortgages and other notes payable	1 000		
	22	Other liabilities (describe ► <u>SECURITY DEPOSITS</u>)	1,000.	676.	
- 1			1 000	cac l	
\dashv	23	Total liabilities (add lines 17 through 22)	1,000.	676.	
- }		Foundations that follow SFAS 117, check here			
ı,		and complete lines 24 through 26 and lines 30 and 31.			
Ses		Unrestricted			
75	25	Temporarily restricted			
8 P	26	Permanently restricted			
ŝ		Foundations that do not follow SFAS 117, check here			
5		and complete lines 27 through 31.			
\$		Capital stock, trust principal, or current funds	0.	0.	
SS		Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
A I		Retained earnings, accumulated income, endowment, or other funds	1,656,228.	1,603,085.	
Net :	30	Total net assets or fund balances	1,656,228.	1,603,085.	
:	31	Total liabilities and net assets/fund balances	1,657,228.	1,603,761.	
Pa	rt l	Analysis of Changes in Net Assets or Fund Ba	alances		
=					
		net assets or fund balances at beginning of year - Part II, column (a), line 3	รบ	1.1	1 (56 000
		t agree with end-of-year figure reported on prior year's return)		1	1,656,228.
-		amount from Part I, line 27a		2	<u><53,143.</u>
		increases not included in line 2 (itemize)		3	0.
		nes 1, 2, and 3		4	1,603,085.
		ases not included in line 2 (itemize)		5	0.
6 <u>T</u>	otal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	. 6	1,603,085.
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THE JOSEPHS FOUNDATION

Form 990-PF (2016) THE	JOSEPHS FOUNDA and Losses for Tax on	TION	4 Innome		_		8	8-038	5101	Page 3
	cribe the kind(s) of property sold (e		t income	(b) F	How acc	uired	(c) Date	acquired	(d) Dat	te sold
	arehouse; or common stock, 200 s			D D	How acc - Purch - Donat	ase		day, yr.)		ay, yr.)
1a										
b SEE ATTACHED	STATEMENT			<u> </u>						
<u>c</u>				<u> </u>	_					
<u> </u>				-						
<u>e</u>	(f) Depreciation allowed	(a) Co	st or other basis	<u> </u>			(b) (i	iaın or (loss)		
(e) Gross sales price	(or allowable)		expense of sale					s (f) minus (
a		 -								
b										
<u>c</u>										
<u>d</u>										
e 363,273.		the foundation	249,34	2.						<u>,931.</u>
Complete only for assets shown	ng gain in column (h) and owned b					(I) col.	Gains (C (k), but	Col. (h) gain r not less than	ninus -0-) or	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (1), if any				Losses	(from col. (h))	
<u>a</u>										
<u>b</u>		- 								
<u>c</u>		 	·	+	_					
<u>d</u>		 -							113	,931.
<u>e</u> .	C If goin also ast	or in Dort Llino	7	\exists						, , , , , .
2 Capital gain net income or (net ca	If gain, also ent apital loss)			<u> </u>	2				113	<u>,931.</u>
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) a	and (6):			i					
If gain, also enter in Part I, line 8,	column (c).							a. / a		
If (loss), enter -0- in Part I, line 8 Part V Qualification U	Inder Section 4940(e) fo	r Reduced	Tay on Net	Inv	3 estm	ent Inc	ome	N/A		
(For optional use by domestic private										
(FOI OPHONAL USE DY COMESCIC PHYAIC	e touridations subject to the Section	1 4340(a) tax UII	net mvestitient m	COME	i- <i>)</i>					
If section 4940(d)(2) applies, leave to	his part blank.									
Was the foundation liable for the sec	tion 4942 tax on the distributable a	mount of any ye	ear in the base per	od?					Yes	X No
If "Yes," the foundation does not qua										
1 Enter the appropriate amount in (a)	each column for each year; see the	instructions be	fore making any ei						(d)	
Base periód years	ng in) Adjusted qualifying d	istributions	Net value of no	(c) nchar		se assets		Distribi (col. (b) divi	(d) ition ratio	(c))
Calendar year (or tax year beginni 2015		11,685.				,696		(COL (D) divi		51906
2014		11,785.				,685				52936
2013		97,337.				,140				53127
2012		72,276.		1		,587				47657
2011	'	77,317.		1	<u>, 304</u>	,501	<u>. </u>		.0	<u>59269</u>
							_		_	C 4 0 0 5
2 Total of line 1, column (d)	р	lander Otto	b., 45	-4			2		. 2	<u>64895</u>
3 Average distribution ratio for the state the foundation has been in exister		I on line 2 by 5,	or by the number	of yea	ars		3		0	52979
fue ioningmon has been in exister	nce il less than 5 years						-			32313
4 Enter the net value of noncharitab	ole-use assets for 2016 from Part X	. line 5					4	2	2.016	<u>,461.</u>
		,						_		<u>, </u>
5 Multiply line 4 by line 3							5		106	,830.
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)						6			<u>693.</u>
							_		100	E 2 2
7 Add lines 5 and 6							7		107	<u>,523.</u>
8 Enter qualifying distributions from	n Part XII. line 4						8		108	,328.
. , ,	line 7, check the box in Part VI, lin	e 1b. and comp	lete that nart using	na 1%	6 tax rai	te		<u> </u>		,
See the Part VI instructions.	I , UNDOR THE OUR HET CITE VI, IIII	o to, and comp	part polit	, u 1/	- wan id					
623521 11-23-16								Fo	rm 990-	PF (2016)

_	m 990-PF (2016) THE JOSEPHS FOUNDATION		<u>0385</u>			Page 4
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see ii	nstru	ictio	ns)
1	a Exempt operating foundations described in section 4940(d)(2), check here ▶ 🔛 and enter "N/A" on line 1.		1			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	1				
1	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 💹 and enter 1%	1			6	<u>93.</u>
	of Part I, line 27b					
	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3			6	93.
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			6	93.
6						
;	a 2016 estimated tax payments and 2015 overpayment credited to 2016		ŀ			
	b Exempt foreign organizations - tax withheld at source 6b					
	c Tax paid with application for extension of time to file (Form 8868)	7	ļ			
	d Backup withholding erroneously withheld 6d					
7		7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				20.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	. 9			7	13.
10	· · · · · · · · · · · · · · · · · · ·	10			•	
11						
	art VII-A Statements Regarding Activities					
	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interve	ne in			Yes	No
	any political campaign?		ľ	1a		X
	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definiti	nn)?	Ì	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials public				_	
	distributed by the foundation in connection with the activities.	o,,,oa o,	1			
,	Did the foundation file Form 1120-POL for this year?			1c		X
	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		ŀ	-10		
•		•	Ì			
	E Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	•				
•	managers. > \$ 0.		i			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		i	2		X
-	If "Yes," attach a detailed description of the activities		ŀ			
2	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	or				
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	, 01		3		<u> </u>
A	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		ŀ	4a		X
	o If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	-	′ <u></u>	5		X
J	If "Yes," attach the statement required by General Instruction T		ŀ	<u> </u>		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
U	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 st 	ate law				
	remain in the governing instrument?	ito iavv	j	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part	N	ŀ	7	X	
′	bid the foundation have at least \$5,000 in assets at any time during the year in thes, complete hart in, cor (c), and hart		ŀ	<u>'</u>		
0.	Enter the states to which the foundation reports or with which it is registered (one instructions)					
08	a Enter the states to which the foundation reports or with which it is registered (see instructions)					
	NV					
0	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		J	0 L	v	
^	of each state as required by General Instruction G? If "No," attach explanation	landar	·· }	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for c	uenudf				v
40	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV		}	9		X
<u>10</u>	Did any persons become substantial contributors during the tax year? if "yes," attach a schedule listing their names and addresses			10		

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X

3b

4a

N/A

Form 4720, to determine if the foundation had excess business holdings in 2016)

had not been removed from jeopardy before the first day of the tax year beginning in 2016?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Peguired (contro	88-03851	OI Page 6
	FORTH 4720 IVIAY DE	nequii eu (contin	luea)	
5a During the year did the foundation pay or incur any amount to:(1) Carry on propaganda, or otherwise attempt to influence legislation (section)	n 404E(a\\Q		es X No	
(1) Carry on propagation, or otherwise attempt to influence registation (section (2)) Influence the outcome of any specific public election (see section 4955);	• • •	•	es La No	
any voter registration drive?	or to carry on, unectily or mun		es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	2	·	es X No	
(4) Provide a grant to an individual for travel, study, or other similar purpose.			23 22 110	
4945(d)(4)(A)? (see instructions)	m described in Section	□ v ₄	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary	or educational nurnoses or	• –	22 110	
the prevention of cruelty to children or animals?	, or oddoditorial parposes, or		es 🗓 No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the excentions described			
section 53.4945 or in a current notice regarding disaster assistance (see instri	•		N/A	sb
Organizations relying on a current notice regarding disaster assistance check l	•			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption i		ined .		
expenditure responsibility for the grant?			es 🔲 No	
If "Yes," attach the statement required by Regulations section 53.494		.,		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?	pay promise on	Y	es X No	1 1
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			Sb X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	Ye	es X No	1 1
b If "Yes," did the foundation receive any proceeds or have any net income attrib				7b
Part VIII Information About Officers, Directors, Trust		anagers, Highl	y	
Paid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their		1	T 7-05	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (if not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	enter -0-)	compensation	allowances
JENNIFER L. JOSEPHS	DIRECTOR	İ]	
3554 CHAMA AVENUE	4		. i	_
LAS VEGAS, NV 89121	1.00	0.	0.	0.
ADELE F. JOSEPHS	DIRECTOR]	
67 ISLEWORTH DRIVE				•
HENDERSON, NV 89052	0.00	0.	0.	0.
DIANA Z. MOORE	DIRECTOR			
970 DAWN LIGHT AVENUE			ا م	•
LAS VEGAS, NV 89123	0.00	0.	0.	0.
PAULINE CREIGHTON	SECRETARY		i i	
85 MAGICAL MYSTERY LANE	0.00) (1	0
LAS VEGAS, NV 89014 2 Compensation of five highest-paid employees (other than those inc	0.00	enter "MONE "	0.	0.
2 Compensation of the highest-paid employees (other than those inc		enter NONE.	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	account, other allowances
NONE	devoted to position	 	Compensation	anowances
NONE	ļ			
		 		
	1			
		 		
	1			
		† · · · · · · · · · · · · · · · · · · ·		
	1) i	
		† 		
	1			
Total number of other employees paid over \$50,000	·		▶	0
		•	Form 5	990-PF (2016)

Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE	Form 990-PF (2016) THE JOSEPHS FOUNDATION	<u>88-0385</u>	101 Page 7
(a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE Compensation	Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
Total number of others receiving over \$50,000 for professional services ▶ 0 Part IX-A Summary of Direct Charitable Activities Let the foundation's four largest direct chariable activities of any apparations and other beneficiaries served, conferences converted, research papers produced, etc. 1 N/A Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A All other program-related investments. See instructions.	3 Five highest-paid independent contractors for professional services. If none, enter "	NONE."	
Total number of others receiving over \$50,000 for professional services. Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1	NONE		
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1			
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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 beneficianes served, conferences convened, research papers produced, etc. 1 N/A 2	Total number of others receiving over \$50,000 for professional services	>	0
Total. Add lines 1 through 3 CAPETISES CAPETISE C			
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A All other program-related investments. See instructions.	List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers productions.	al information such as the ced, etc.	Expenses
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A All other program-related investments. See instructions.	1 N/A		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A All other program-related investments. See instructions.			
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Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A All other program-related investments. See instructions.	2		
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Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A All other program-related investments. See instructions.	3		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount All other program-related investments. See instructions. Fotal, Add lines 1 through 3			
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Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. N/A All other program-related investments. See instructions. Fotal, Add lines 1 through 3			
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All other program-related investments. See instructions. Social. Add lines 1 through 3		es 1 and 2.	Amount
All other program-related investments. See instructions. See instructions. Fotal. Add lines 1 through 3			
All other program-related investments. See instructions. See instructions. Fotal. Add lines 1 through 3			
All other program-related investments. See instructions. See instructions. Fotal. Add lines 1 through 3			
Total. Add lines 1 through 3	2		
Total. Add lines 1 through 3			
Total. Add lines 1 through 3	All other program-related investments. See instructions		
Total. Add lines 1 through 3 ▶ 0. Form 990-PF (2016)	3		
Total. Add lines 1 through 3 ▶ 0. Form 990-PF (2016)			
Total. Add lines 1 through 3 ▶ 0. Form 990-PF (2016)			
Total. Add lines 1 through 3 ▶ 0. Form 990-PF (2016)			
Total. Add lines 1 through 3 ▶ 0. Form 990-PF (2016)			
Form 990-PF (2016)	Fetal Add lines 1 through 3		
	iotal modulinos i unougho		m 990-PF (2016)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	- -	
а	Average monthly fair market value of securities	1a	2,013,769.
b	Average of monthly cash balances	1b	2,013,769. 33,400.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	2,047,169.
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	0.
3	Subtract line 2 from line 1d	3_	2,047,169.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	30,708.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5_	2,016,461.
6	Minimum investment return. Enter 5% of line 5	6	100,823.
Р	art XI Distributable Amount (see instructions) (Section 4942(I)(3) and (I)(5) private operating foundations are foreign organizations check here in and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	100,823.
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.)		
	Add lines 2a and 2b	2c	693.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	100,130.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	100,130.
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	100,130.
P	art 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_	108,328.
b	Program-related investments - total from Part IX-B	1b	<u> </u>
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	108,328.
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	5	693.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	107,635.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies for	the section

Form **990-PF** (2016)

Part XIII Undistributed Income (see instructions)

	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2015	2015	2016
Distributable amount for 2016 from Part XI,	}			100 120
line 7				100,130.
2 Undistributed income, if any, as of the end of 2016			0	
a Enter amount for 2015 only			0.	
b Total for prior years:				
Evene distributions corrector if only to 2010:		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011				
b From 2012				
e From 2013 6,698.				
d from 2014 8,011.				
e From 2015 7,524.	20 222			
f Total of lines 3a through e	22,233.			
4 Qualifying distributions for 2016 from				
Part XII, line 4: ►\$ 108,328.		1	•	
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior		_ 1		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.		<u> </u>	100 130
d Applied to 2016 distributable amount	0 100			100,130.
e Remaining amount distributed out of corpus	8,198.	_ 		0.
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			<u> </u>
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	30,431.			
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 instr.			0.	
f Undistributed income for 2016. Subtract		1		
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				<u>0.</u>
7 Amounts treated as distributions out of	į,	ļ		
corpus to satisfy requirements imposed by		İ		
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	0.			
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a	30,431.			
O Analysis of line 9:		ł		
a Excess from 2012				
b Excess from 2013 6,698.				
c Excess from 2014 8,011.	1			
d Excess from 2015 7,524.		ļ		
e Excess from 2016 8, 198.		<u> </u>		5. 000 DE 100 (0)

• • •				22.22	05404	
	EPHS FOUNDA		A	88-03	85101 Page 10	
Part XIV Private Operating F			A, question 9)	N/A		
1 a If the foundation has received a ruling o						
foundation, and the ruling is effective fo			n control	4942(j)(3) or 49	42(j)(5)	
b Check box to indicate whether the found	Tax year	ing roundation described i	Prior 3 years	<u> </u>	42())(3)	
2 a Enter the lesser of the adjusted net	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total	
income from Part I or the minimum investment return from Part X for	(4) 20.10	(5/20.0	(4) - 3 - 1	(-,		
each year listed 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(i)(3)(B)(iii)						
(3) Largest amount of support from			-			
an exempt organization						
(4) Gross investment income						
Part XV Supplementary Info	rmation (Comple	ete this part only	f the foundation	on had \$5,000 or mo	ore in assets	
at any time during t	he year-see inst	ructions.)		· · · · · · · · · · · · · · · · · · ·		
1 Information Regarding Foundatio	n Managers:					
a List any managers of the foundation who	o have contributed more		ibutions received by t	he foundation before the clo	se of any tax	
year (but only if they have contributed m	iore than \$5,000). (See s	section 507(d)(2).)				
NONE						
 b List any managers of the foundation who other entity) of which the foundation has 			or an equally large po	rtion of the ownership of a p	artnership or	
NONE						
2 Information Regarding Contributi	on, Grant, Gift, Loan	, Scholarship, etc., Pr	ograms:	-		
Check here ▶ 🗶 If the foundation o	nly makes contributions	to preselected charitable	organizations and doe			
the foundation makes gifts, grants, etc. (see instructions) to indi	viduals or organizations u	nder other conditions,	complete items 2a, b, c, and	l d	
a The name, address, and telephone numl	per or e-mail address of	the person to whom apple	ations should be add	ressed:		
b The form in which applications should be submitted and information and materials they should include:						
b The form in which applications should b	e submitted and informa	ation and materials they sh	ould include:	,		
c Any submission deadlines:						
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields,	kinds of institutions, o	r other factors:		

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year NONE PUBLIC CHARITY CHARITABLE ADAMS PLACE FOR GRIEF CONTRIBUTION 601 S RANCHO, BLDG C, STE 19 300, LAS VEGAS, NV 89106 BOYS & GIRLS CLUB OF LAS VEGAS NONE PUBLIC CHARITY CHARITABLE CONTRIBUTION 2850 SOUTH LINDELL ROAD 1,000. LAS VEGAS, NV 89126 PUBLIC CHARITY CHARITABLE NONE BOYS & GIRLS CLUB OF LAS VEGAS CONTRIBUTION 2850 SOUTH LINDELL ROAD 1,000. LAS VEGAS, NV 89126 PUBLIC CHARITY CHARITABLE NONE BOYS & GIRLS CLUB OF LAS VEGAS CONTRIBUTION 2850 SOUTH LINDELL ROAD 1,000, LAS VEGAS NV 89126 BOYS TOWN OF NEVADA NONE PUBLIC CHARITY CHARITABLE CONTRIBUTION 821 NORTH MOJAVE ROAD 1,000. LAS VEGAS NV 89101 CONTINUATION SHEET(S **▶** 3a SEE 108 328. Total b Approved for future payment NONE

3b

Total

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

Enter gross amounts unless otherwise indicated.	Unrelated business income			ded by section 512, 513, or 514	(e)	
1 Program service revenue:	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income	
	Code		1000	 	 	
a	<u> </u>		-			
b	}		├─-	 		
·			 		 	
d	<u> </u>		 			
e	ļ		├			
	L		ļ			
g Fees and contracts from government agencies			ļ			
2 Membership dues and assessments			ļ			
3 Interest on savings and temporary cash						
investments			14	5.		
4 Dividends and interest from securities			14	25,445.		
5 Net rental income or (loss) from real estate:			ĺ			
a Debt-financed property		·				
b Not debt-financed property			16	9,934.		
6 Net rental income or (loss) from personal						
property						
7 Other investment income						
8 Gain or (loss) from sales of assets other			· · · ·			
than inventory			14	113,931.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory			 			
11 Other revenue:			-	-		
	j					
a		. <u>.</u>	 			
b	-		-			
C						
d	-		<u> </u>			
e	<u> </u>			140 215		
12 Subtotal. Add columns (b), (d), and (e)		0.	L	149,315.		
13 Total. Add line 12, columns (b), (d), and (e)				13	149,315.	
(See worksheet in line 13 instructions to verify calculations.)						
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	t Purposes		
						
Line No. Explain below how each activity for which incom			contrib	outed importantly to the accom	plishment of	
the foundation's exempt purposes (other than b	y providing tu	nas for such purposes).			-	
N/A						
						
	<i>-</i>		_		·	
		 				
						

Pal	IL VAII	Information Re Exempt Organ	•	nsters 10	and Ir	ansactions	and Relation	nships With Nonc	haritable	€	
1	Did the o	organization directly or indi		of the follow	ing with an	v other organizat	non described in s	action 501/c) of		Yes	No
		(other than section 501(c						ection so i(c) or		103	110
		s from the reporting found					unzauons.				
	(1) Cas		ation to a nononaria	abic excilipt o	n gamzatioi	701.			1a(1)		v
	` '	er assets							1a(1)		X
		insactions:							14(2)		_
		s of assets to a noncharita	ihla avamnt organiza	ation					45/41		v
		chases of assets from a no							1b(1)	_	X
		tal of facilities, equipment,		organization					1b(2)		X
		nbursement arrangements							1b(3)		X
		•							1b(4)		X
		ns or loan guarantees	anharahin ar firadra						1b(5)		X
		ormance of services or me							1b(6)		X
		of facilities, equipment, ma							1c		<u>X</u>
(or servic	swer to any of the above is es given by the reporting for d) the value of the goods,	oundation. If the fou	ındatıon receiv	ved less th	am (b) snouid a an fair market val	ways snow the falue in any transact	ir market value of the good ion or sharing arrangeme	as, other ass nt, show in	ets,	
a) Lin		(b) Amount involved		f noncharitabl		organization	(d) Description	tion of transfers, transactions,	and charing ar	an ceme	
<u> </u>		(-,	(0)	N/A	- o onompt	J. gamaanon	(4) 5034151	TOTO TELESCO, EMISACTIONS,	are stating at		
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	-										
	_		·								
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- Je	the few	ndation disastly as indisast	le official of could be an o								
		ndation directly or indirect				ax-exempt organ	izations described			37	1
		501(c) of the Code (other)(3)) or in seci	tion 52/				L Yes	X) NO
D II	res, co	omplete the following sche (a) Name of orga			(h) Tuno	of organization	т	(a) Description of relativ	nachin.	-	
			amzanon		(U) Type	OI OI YAINZAUOII		(c) Description of relation	onsnip		
		N/A									
											
					<u> </u>						
					-						
_	Under	penalties of perjury, I declare ti	hat I have examined this	s return uncludin	accompar	ving echadulae and	statements and to the	ne heet of my knowledge —			
Sigr lere	and be	Paulin Rulin Rulin			n taxpayer) i	s based on all inform 5-11-17	nation of which prepa		May the IRS diretum with the shown below (prepare	ar .
	Sign	nature of officer or frustee	<u>//</u>	1	Dat	e	Title	<u> </u>			
		Print/Type preparer's nat	ane	Preparer's si	ignature		Date	Check if PTI	IN		
اہ: ۔ ۱	1			1 1	041		-1-1-	self- employed			
aid		MICHAEL J.		und	fllen		<u> </u>	P	009239	914	
-	oarer Only	Firm's name ► MICE	HAEL J AL	OIAN C	PA II	IC	• 	Firm's EIN ► 26 -	389248	33	_
		Firm's address ▶ 91 (7 WEST R	USSELL	ROAI	<u> </u>	· ·				
	LAS VEGAS, NV 89148							Phone no. 702-	878-17	795	

N/A

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).

If (loss), enter "-0-" in Part I, line 8

3 Grants and Contributions Paid During the	(ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
BOYS TOWN OF NEVADA	NONE	PUBLIC CHARITY	CHARITABLE	
821 NORTH MOJAVE ROAD			CONTRIBUTION]
LAS VEGAS, NV 89101				1,00
BOYS TOWN OF NEVADA	NONE	PUBLIC CHARITY	CHARITABLE	
821 NORTH MOJAVE ROAD			CONTRIBUTION	
LAS VEGAS, NV 89101	 	 		1,00
CANDLELIGHTERS CHILDHOOD CANCER	none	PUBLIC CHARITY	CHARITABLE	
FOUNDATION	ļ.		CONTRIBUTION	į
8990 SPANISH RIDGE AVE SUITE 100				
LAS VEGAS, NV 89148	 	 		50
CANDLELIGHTERS CHILDHOOD CANCER	NONE	PUBLIC CHARITY	CHARITABLE	}
FOUNDATION			CONTRIBUTION	
8990 SPANISH RIDGE AVE SUITE 100				
LAS VEGAS, NV 89148				1,00
		1		
CASA DE LUZ	NONE	PUBLIC CHARITY	CHARITABLE	}
2412 TAM DRIVE			CONTRIBUTION	}
LAS VEGAS, NV 89102		-		1,00
CASA DE LUZ	NONE	PUBLIC CHARITY		
2412 TAM DRIVE LAS VEGAS NV 89102			CONTRIBUTION	1.00
AND VEGNO, NV 03102				1.00
23.03. 20. 7.09	TOWN.	PUBLIC CHARITY	CUARTER DE E	
CASA DE LUZ 2412 TAM DRIVE	NONE	PUBLIC CHARITI	CONTRIBUTION	ļ
LAS VEGAS, NV 89102				1,00
		1		
CASA DE LUZ	NONE	PUBLIC CHARITY	CHARITABI.E	
2412 TAM DRIVE			CONTRIBUTION	
AS VEGAS, NV 89102	 	ļ		1,00
		}		
CATHOLIC CHARITIES OF SOUTHERN NEVADA	NONE	PUBLIC CHARITY	 CHARITABLE	
1501 N LAS VEGAS BLVD			CONTRIBUTION	
AS VEGAS NV 89101	ļ	 		50
		1		
CURE FOR THE KIDS	NONE	PUBLIC CHARITY	CHARITABLE	
3121 S MARYLAND PKWY SUITE 220		l .	CONTRIBUTION	
LAS VEGAS, NV 89109	<u> </u>	L	L	1.00
Total from continuation sheets				104 02

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient show any relationship to Foundation Purpose of grant or **Amount** any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient CURE FOR THE KIDS NONE PUBLIC CHARITY CHARITABLE 3121 S MARYLAND PKWY SUITE 220 CONTRIBUTION LAS VEGAS, NV 89109 1,000, CURE FOR THE KIDS NONE PUBLIC CHARITY CHARITABLE 3121 S MARYLAND PKWY SUITE 220 CONTRIBUTION LAS_VEGAS_ NV 89109 2,000. HELP OF SOUTHERN NEVADA NONE PUBLIC CHARITY CHARITABLE 1640 EAST FLAMINGO ROAD CONTRIBUTION LAS VEGAS NV 89119 1,625. HELP OF SOUTHERN NEVADA иоие PUBLIC CHARITY CHARITABLE 1640 EAST FLAMINGO ROAD CONTRIBUTION LAS VEGAS, NV 89119 1,300. HELP OF SOUTHERN NEVADA NONE PUBLIC CHARITY CHARITABLE 1640 EAST FLAMINGO ROAD CONTRIBUTION 1,000. LAS VEGAS, NV 89119 HELP OF SOUTHERN NEVADA PUBLIC CHARITY CHARITABLE NONE 1640 EAST FLAMINGO ROAD CONTRIBUTION LAS VEGAS NV 89119 2,600. MCCAW SCHOOL OF MINES NONE PUBLIC CHARITY CHARITABLE CONTRIBUTION 57 LYNN LANE HENDERSON, NV 89015 500. PUBLIC CHARITY CHARITABLE NEVADA CHILDHOOD CANCER FOUNDATION NONE 6070 S. EASTERN #200 CONTRIBUTION 1,000. LAS VEGAS NV 89119 NEVADA CHILDHOOD CANCER FOUNDATION NONE PUBLIC CHARITY CHARITABLE 6070 S. EASTERN #200 CONTRIBUTION LAS VEGAS, NV 89119 2,000. NOAHS ANIMAL HOUSE NONE PUBLIC CHARITY CHARITABLE CONTRIBUTION P.O. BOX 669 LAS VEGAS NV 89125 500, Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount contribution any foundation manager or substantial contributor status of Name and address (home or business) recipient NOAHS ANIMAL HOUSE NONE PUBLIC CHARITY CHARITABLE P.O. BOX 669 CONTRIBUTION LAS VEGAS, NV 89125 500, NV PARTNERSHIP FOR HOMELESS YOUTH NONE PUBLIC CHARITY CHARITABLE P.O. BOX 20135 CONTRIBUTION LAS VEGAS NV 89112 1,000. NV PARTNERSHIP FOR HOMELESS YOUTH NONE PUBLIC CHARITY CHARITABLE P.O. BOX 20135 CONTRIBUTION LAS VEGAS, NV 89112 1,625, NV PARTNERSHIP FOR HOMELESS YOUTH NONE PUBLIC CHARITY CHARITABLE P.O. BOX 20135 CONTRIBUTION 1,300. LAS VEGAS, NV 89112 NV PARTNERSHIP FOR HOMELESS YOUTH NONE PUBLIC CHARITY CHARITABLE CONTRIBUTION P.O. BOX 20135 1,000. LAS VEGAS NV 89125 NV PARTNERSHIP FOR HOMELESS YOUTH NONE PUBLIC CHARITY CHARITABLE P.O. BOX 20135 CONTRIBUTION LAS VEGAS, NV 89125 2,600. NV PARTNERSHIP FOR HOMELESS YOUTH NONE PUBLIC CHARITY CHARITABLE P.O. BOX 20135 CONTRIBUTION LAS VEGAS NV 89125 1,300. OLIVE CREST LAS VEGAS NONE PUBLIC CHARITY CHARITABLE 6148 WEST SAHARA CONTRIBUTION LAS VEGAS NV 89146 1,000. OLIVE CREST LAS VEGAS NONE PUBLIC CHARITY CHARITABLE CONTRIBUTION 6148 WEST SAHARA LAS VEGAS NV 89146 1,000. PUBLIC CHARITY CHARITABLE OLIVE CREST LAS VEGAS NONE 6148 WEST SAHARA CONTRIBUTION 1,625. LAS VEGAS NV 89146 Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to contribution Amount status of any foundation manager Name and address (home or business) or substantial contributor recipient OLIVE CREST LAS VEGAS NONE PUBLIC CHARITY CHARITABLE 6148 WEST SAHARA CONTRIBUTION LAS VEGAS, NV 89146 1,000. NONE OLIVE CREST LAS VEGAS PUBLIC CHARITY CHARITABLE 6148 WEST SAHARA CONTRIBUTION LAS VEGAS NV 89146 2,000, SAFE NEST NONE PUBLIC CHARITY CHARITABLE CONTRIBUTION 2915 W. CHARLESTON BLVD, #3 LAS VEGAS, NV 89102 1,120, SAFE NEST NONE PUBLIC CHARITY CHARITABLE 2915 W. CHARLESTON BLVD. #3 CONTRIBUTION LAS VEGAS, NV 89102 40. SAFE NEST NONE PUBLIC CHARITY CHARITABLE 2915 W. CHARLESTON BLVD. #3 CONTRIBUTION LAS VEGAS NV 89102 97. SAFE NEST NONE PUBLIC CHARITY CHARITABLE 2915 W. CHARLESTON BLVD. #3 CONTRIBUTION LAS VEGAS NV 89102 1,000. SAFE NEST NONE PUBLIC CHARITY CHARITABLE 2915 W. CHARLESTON BLVD. #3 CONTRIBUTION LAS VEGAS NV 89102 1,625. SAFE NEST NONE PUBLIC CHARITY CHARITABLE 2915 W. CHARLESTON BLVD. #3 CONTRIBUTION 1,300, LAS VEGAS, NV 89102 SAFE NEST NONE PUBLIC CHARITY CHARITABLE 2915 W. CHARLESTON BLVD. #3 CONTRIBUTION LAS VEGAS NV 89102 1.000. SAFE NEST NONE PUBLIC CHARITY CHARITABLE 2915 W. CHARLESTON BLVD. #3 CONTRIBUTION 1,000. LAS VEGAS, NV 89102 Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or **Amount** any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient NONE SAFE NEST PUBLIC CHARITY CHARITABLE 2915 W. CHARLESTON BLVD. #3 CONTRIBUTION 1,625. LAS VEGAS, NV 89102 SAFE NEST NONE PUBLIC CHARITY CHARITABLE CONTRIBUTION 2915 W. CHARLESTON BLVD. #3 1,950. LAS VEGAS, NV 89102 SAFE NEST PUBLIC CHARITY CHARITABLE NONE 2915 W. CHARLESTON BLVD. #3 CONTRIBUTION 2,000. LAS_VEGAS_ NV 89102 SAFE NEST NONE PUBLIC CHARITY CHARITABLE 2915 W. CHARLESTON BLVD. #3 CONTRIBUTION LAS VEGAS, NV 89102 500. PUBLIC CHARITY CHARITABLE SAFE NEST NONE 2915 W. CHARLESTON BLVD. #3 CONTRIBUTION 1,300. LAS VEGAS NV 89102 SAFE NEST NONE PUBLIC CHARITY CHARITABLE CONTRIBUTION 2915 W. CHARLESTON BLVD, #3 685. LAS VEGAS NV 89102 NONE PUBLIC CHARITY CHARITABLE SAFE NEST CONTRIBUTION 2915 W. CHARLESTON BLVD. #3 LAS VEGAS NV 89102 759. SAFE NEST NONE PUBLIC CHARITY CHARITABLE 2915 W. CHARLESTON BLVD. #3 CONTRIBUTION 732, LAS VEGAS NV 89102 SAINT JOHNS GREEK ORTHODOX CHURCH NONE PUBLIC CHARITY CHARITABLE CONTRIBUTION 5300 EL CAMINO LAS VEGAS NV 89118 1,000. PUBLIC CHARITY CHARITABLE SALVATION ARMY NONE CONTRIBUTION 2035 YALE STREET LAS VEGAS, NV 89108 1,000. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager or substantial contributor status of contribution Name and address (home or business) recipient SALVATION ARMY NONE PUBLIC CHARITY CHARITABLE CONTRIBUTION 2035 YALE STREET LAS VEGAS, NV 89108 1,625. SALVATION ARMY NONE PUBLIC CHARITY CHARITABLE 2035 YALE STREET CONTRIBUTION 1,300, LAS VEGAS, NV 89108 SALVATION ARMY NONE PUBLIC CHARITY CHARITABLE 2035 YALE STREET CONTRIBUTION 1,000. LAS VEGAS, NV 89108 SALVATION ARMY NONE PUBLIC CHARITY CHARITABLE 2035 YALE STREET CONTRIBUTION 1,000. LAS VEGAS NV 89108 SALVATION ARMY NONE PUBLIC CHARITY CHARITABLE CONTRIBUTION 2035 YALE STREET 2,000. LAS VEGAS NV 89108 SALVATION ARMY NONE PUBLIC CHARITY CHARITABLE 2035 YALE STREET CONTRIBUTION LAS VEGAS NV 89108 650, SHADE TREE NONE PUBLIC CHARITY CHARITABLE 1 WEST OWENS CONTRIBUTION N. LAS VEGAS NV 89030 2,000. NONE PUBLIC CHARITY CHARITABLE SHADE TREE 1 WEST OWENS CONTRIBUTION N. LAS VEGAS, NV 89030 1,625. SHADE TREE NONE PUBLIC CHARITY CHARITABLE 1 WEST OWENS CONTRIBUTION N. LAS VEGAS NV 89030 1,300, SHADE TREE NONE PUBLIC CHARITY CHARITABLE 1 WEST OWENS CONTRIBUTION 1,000. N. LAS VEGAS, NV 89030 Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to any foundation manager or substantial contributor Amount status of contribution Name and address (home or business) recipient SHADE TREE NONE PUBLIC CHARITY CHARITABLE 1 WEST OWENS CONTRIBUTION N, LAS VEGAS, NV 89030 1,000. SHADE TREE NONE PUBLIC CHARITY CHARITABLE 1 WEST OWENS CONTRIBUTION N. LAS VEGAS, NV 89030 1,000, SHADE TREE NONE PUBLIC CHARITY CHARITABLE 1 WEST OWENS CONTRIBUTION N. LAS VEGAS NV 89030 1,625. SHADE TREE NONE PUBLIC CHARITY CHARITABLE 1 WEST OWENS CONTRIBUTION 1,950. N. LAS VEGAS NV 89030 SHADE TREE NONE PUBLIC CHARITY CHARITABLE 1 WEST OWENS CONTRIBUTION 2,000, N. LAS VEGAS, NV 89030 SHADE TREE NONE PUBLIC CHARITY CHARITABLE 1 WEST OWENS CONTRIBUTION N, LAS VEGAS NV 89030 500, SHADE TREE NONE PUBLIC CHARITY CHARITABLE CONTRIBUTION 1 WEST OWENS N, LAS VEGAS, NV 89030 1,950. SHADE TREE NONE PUBLIC CHARITY CHARITABLE 1 WEST OWENS CONTRIBUTION 186. N. LAS VEGAS, NV 89030 SHADE TREE NONE PUBLIC CHARITY CHARITABLE 1 WEST OWENS CONTRIBUTION N. LAS VEGAS, NV 89030 978. SHADE TREE NONE PUBLIC CHARITY CHARITABLE 1 WEST OWENS CONTRIBUTION N. LAS VEGAS NV 89030 136. Total from continuation sheets

Part XV Supplementary Information 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount contribution any foundation manager status of Name and address (home or business) or substantial contributor recipient SHADE TREE NONE PUBLIC CHARITY CHARITABLE 1 WEST OWENS CONTRIBUTION 700, N. LAS VEGAS NV 89030 NONE SHADE TREE PUBLIC CHARITY CHARITABLE 1 WEST OWENS CONTRIBUTION N. LAS VEGAS, NV 89030 1,280. SHADE TREE NONE PUBLIC CHARITY CHARITABLE 1 WEST OWENS CONTRIBUTION N. LAS VEGAS, NV 89030 1,659. SHADE TREE NONE PUBLIC CHARITY CHARITABLE 1 WEST OWENS CONTRIBUTION 800. N. LAS VEGAS NV 89030 SHADE TREE NONE PUBLIC CHARITY CHARITABLE 1 WEST OWENS CONTRIBUTION N. LAS VEGAS NV 89030 1,000, SHRINERS HOSPITAL NONE PUBLIC CHARITY CHARITABLE 2900 ROCKY POINT DR CONTRIBUTION TAMPA FL 33607 500, SHRINERS HOSPITAL NONE PUBLIC CHARITY CHARITABLE 2900 ROCKY POINT DR CONTRIBUTION 1,000. TAMPA FL 33607 SHRINERS HOSPITAL NONE PUBLIC CHARITY CHARITABLE 2900 ROCKY POINT DR CONTRIBUTION TAMPA FL 33607 1,000. ST. JUDES RANCH FOR CHILDREN NONE PUBLIC CHARITY CHARITABLE 100 ST. JUDES ST CONTRIBUTION BOULDER CITY, NV 89005 1,000. PUBLIC CHARITY CHARITABLE ST. JUDES RANCH FOR CHILDREN NONE 100 ST. JUDES ST CONTRIBUTION 1,000. BOULDER CITY NV 89005 Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to Amount any foundation manager status of Name and address (home or business) recipient or substantial contributor STREET TEENS NONE PUBLIC CHARITY CHARITABLE P.O. BOX 70478 CONTRIBUTION LAS VEGAS, NV 89170 1,000. STREET TEENS NONE PUBLIC CHARITY CHARITABLE P.O. BOX 70478 CONTRIBUTION LAS VEGAS NV 89170 1,625. STREET TEENS NONE PUBLIC CHARITY CHARITABLE P.O. BOX 70478 CONTRIBUTION LAS VEGAS NV 89170 1,300. STREET TEENS NONE PUBLIC CHARITY CHARITABLE P.O. BOX 70478 CONTRIBUTION LAS VEGAS NV 89170 1,000. STREET TEENS NONE PUBLIC CHARITY CHARITABLE P.O. BOX 70478 CONTRIBUTION LAS_VEGAS_ NV 89170 2,600. STREET TEENS NONE PUBLIC CHARITY CHARITABLE P.O. BOX 70478 CONTRIBUTION LAS VEGAS, NV 89170 731. STREET TEENS NONE PUBLIC CHARITY CHARITABLE P.O. BOX 70478 CONTRIBUTION LAS VEGAS NV 89170 500. THE HUNTRIDGE TEEN CLINIC NONE PUBLIC CHARITY CHARITABLE 2100 SOUTH MARYLAND PARKWAY CONTRIBUTION 1,000. LAS VEGAS NV 89104 THE HUNTRIDGE TEEN CLINIC NONE PUBLIC CHARITY CHARITABLE 2100 SOUTH MARYLAND PARKWAY CONTRIBUTION LAS VEGAS, NV 89104 1,000. THREE SQUARE NONE PUBLIC CHARITY CHARITABLE 4190 NORTH PECOS ROAD CONTRIBUTION LAS VEGAS NV 89115 500. Total from continuation sheets

Part XV **Supplementary Information** 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation status of recipient Purpose of grant or contribution Amount any foundation manager or substantial contributor Name and address (home or business) THREE SQUARE NONE PUBLIC CHARITY CHARITABLE 4190 NORTH PECOS ROAD CONTRIBUTION 300. LAS VEGAS NV 89115 ZELZAH SHRINE TEMPLE NONE PUBLIC CHARITY CHARITABLE 2313 S EASTERN AVE CONTRIBUTION LAS VEGAS, NV 89104 500. Total from continuation sheets

FORM 990-PF INTERE	ST ON SAVII	NGS AND TEM	PORARY	CASH IN	VESTMENTS	STATEMENT 1
SOURCE		(A REVE PER B	NUE		(B) VESTMENT COME	(C) ADJUSTED NET INCOME
BANK OF AMERICA			5.		5.	
TOTAL TO PART I, LI	NE 3		5.		5.	
FORM 990-PF	DIVIDENDS	S AND INTER	EST FRO	M SECUR	ITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	RE		(B) NET INVES MENT INCO	(C) T- ADJUSTED ME NET INCOME
WELLS FARGO ADVISORS	25,445		0.	25,445.	25,44	5.
TO PART I, LINE 4	25,445		0.	25,445.	25,44	5.
FORM 990-PF		RENTAL IN	COME			STATEMENT 3
KIND AND LOCATION OF	F PROPERTY				ACTIVITY NUMBER	GROSS RENTAL INCOME
1488 SANTA ANITA DRI	[VE				1	9,934.
TOTAL TO FORM 990-PR	F, PART I,	LINE 5A				9,934.
FORM 990-PF		ACCOUNTI	NG FEES			STATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS	(B NET IN MENT I	VEST-	(C) ADJUSTED NET INCOM	
ACCOUNTING FEES		1,665.		1,665.		0.
TO FORM 990-PF, PG 1	, LN 16B	1,665.		1,665.		0.

FORM 990-PF C	STATEMENT 5					
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(C) ADJUSTEI NET INCOM		
MANAGED ACCOUNT FEE	42,583.	42,	583.			0.
TO FORM 990-PF, PG 1, LN 16C	42,583.	42,	583.			0.
FORM 990-PF TAXES					STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
FOREIGN TAXES INVESTMENT INCOME TAX	419. 1,733.		419. 733.			0.
TO FORM 990-PF, PG 1, LN 18 =	2,152.	2,	152.			0.
FORM 990-PF CORPORATE STOCK					STATEMENT	7
DESCRIPTION BOOK VALUE					FAIR MARKET VALUE	
WELLS FARGO ADVISORS #3398-2538 1,127,0				,127,039.	1,980,015.	
TOTAL TO FORM 990-PF, PART II, LINE 10B 1,127,039.					1,980,015.	
FORM 990-PF DEPRECIATION OF	ASSETS NOT	HELD FOR	INVE	STMENT	STATEMENT	8
DESCRIPTION		T OR BASIS		MULATED ECIATION	BOOK VALU	E
BUILDING LAND IMPROVEMENTS A/C UNIT		510,300. 56,700. 12,732. 9,380.		130,303. 0. 7,833. 5,371.	379,9 56,7 4,8 4,0	00. 99.
TOTAL TO FM 990-PF, PART II,	 LN 14	589,112.		143,507.	445,605.	