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2016

OMB No 1545-0052

Form 9	9	U	-	Ρ	r
% J					

Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

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

Open to Public Inspection

For	caler	ndar year 2016, or tax year beginnir	ng 01-01-20	16 , aı	nd er	nding 12-31-	2016			
		indation FOX FAMILY FOUNDATION	A Employer Id	A Employer identification number						
	IEDA C	FOX FAMILY FOUNDATION				95-4775770				
Number and street (or P O box number if mail is not delivered to street address) Room/suite 12411 VENTURA BLVD							mber (see instructior	ns)		
							•			
		, state or province, country, and ZIP or foreign posta Y, CA 91604	il code			C If exemption	application is pending	g, check here		
G (neck al	I that apply Initial return Init	ual return of a	former public charity		D.1 . Foreign or	ganizations, check he	are \Box		
• •	reek ur		nended return	rormer public ename,		_	ganizations meeting	▶ ⊔		
			me change				k here and attach cor			
H C	neck tv	pe of organization \square Section 501(c)(3) ex		foundation			undation status was t n 507(b)(1)(A), chec			
		1 4947(a)(1) nonexempt charitable trust				under sectio	11 307(B)(1)(A), check	Killere - —		
				☑ Cash ☐ Accru	ıal		ition is in a 60-month			
			er (specify) Jumn (d) must	be on cash basis)		under sectio	n 507(b)(1)(B), checl	k here ▶ □		
Pa	rt I	Analysis of Revenue and Expenses	(The total	(-) B				(d) Disbursements		
		of amounts in columns (b), (c), and (d) may not n equal the amounts in column (a) (see instructions	ecessarıly	(a) Revenue and expenses per books	(b)	Net investment income	(c) Adjusted net income	for charitable purposes		
	1	Contributions, gifts, grants, etc , received (a		38,930				(cash basis only)		
	-	schedule)		55,530						
	2	Check ► ☐ If the foundation is not require	d to attach							
	3	Interest on savings and temporary cash inve	estments							
	4	Dividends and interest from securities		240,822		240,822				
	5a	Gross rents								
	b	Net rental income or (loss)								
KIE	6a	Net gain or (loss) from sale of assets not on	line 10	10,479						
Revenue	b	Gross sales price for all assets on line 6a	348,318							
8	7	Capital gain net income (from Part IV, line 2)			10,479				
	8	Net short-term capital gain								
	9	Income modifications								
	10a b	Gross sales less returns and allowances Less Cost of goods sold								
	c	Gross profit or (loss) (attach schedule)								
	11			70,806		0	70,806			
	12	Total. Add lines 1 through 11		361,037	-	251,301	70,806			
	13	Compensation of officers, directors, trustees		0		0	0	0		
	14	Other employee salaries and wages		190,813		0	0	190,813		
Š	15	Pension plans, employee benefits		8,619		0	0	8,619		
ารย	16a	Legal fees (attach schedule)								
<u>8</u>	ь	Accounting fees (attach schedule)		5,163		0	0	5,163		
and Administrative Expenses	С	Other professional fees (attach schedule)		71,758		15,189	0	56,569		
ŧξ	17	Interest								
stra	18	Taxes (attach schedule) (see instructions)		15,178		36	0	15,142		
Ī	19	Depreciation (attach schedule) and depletion	٠							
Ē	20	Occupancy								
ρ	21	Travel, conferences, and meetings		165,636		0	0	165,636		
a	22	Printing and publications		4,290		0	0	4,290		
ыğ	23	Other expenses (attach schedule)		64,497		16,139	0	48,358		
Operating	24	Total operating and administrative expe								
<u>g</u>		Add lines 13 through 23		525,954	<u> </u>	31,364	0	494,590		
_	25	Contributions, gifts, grants paid		149,623				149,623		
	26	Total expenses and disbursements. Add 25	lines 24 and	675,577		31,364	0	644,213		
	27	Subtract line 26 from line 12					-			
	a	Excess of revenue over expenses and disbursements		-314,540						
	ь	Net investment income (if negative, enter	0-)			219,937				
	С	Adjusted net income(If negative, enter -0	-)				70,806			
For	Paper	work Reduction Act Notice, see instruction	ons.			Cat No 11289>	For	m 990-PF (2016)		

Form 990-PF (2016) Page 2 Attached schedules and amounts in the description column Beginning of year End of year Part II Balance Sheets 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 115,306 99.067 99,067 87,475 80,712 80,712 2 Savings and temporary cash investments 3 Accounts receivable ▶ Less allowance for doubtful accounts ▶ Pledges receivable ▶ 4 Less allowance for doubtful accounts 5 Grants receivable

2,032,600

733,538

2,480,385

5,449,304

5,449,304

5.449.304

5,449,304

1.748,645

647,005

2,571,785

5,147,214

5,147,214

5.147.214

5,147,214

5,449,304

-314,540

5,148,741

5,147,214 Form **990-PF** (2016)

13,977

1,527

1

2

3

4 5

6

1.748,645

647,005

2,571,785

5,147,214

Assets	

6

7

8

9

10a b

c

11

12

13 14

15

16

17

18

19 20

21

22

23

24

25

28

29 Net

30

31

Part III

2

3

4

Liabilities

Balances

Fund 26

ō

Assets 27 Receivables due from officers, directors, trustees, and other

Other notes and loans receivable (attach schedule)

Investments—land, buildings, and equipment basis ▶

Less accumulated depreciation (attach schedule) ▶

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Less allowance for doubtful accounts ▶

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Accounts payable and accrued expenses .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) -

Enter amount from Part I, line 27a

Other assets (describe > _

Other liabilities (describe ▶_

Temporarily restricted

Permanently restricted .

disqualified persons (attach schedule) (see instructions)

Investments—U S and state government obligations (attach schedule)

Investments—corporate stock (attach schedule) Investments—corporate bonds (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that follow SFAS 117, check here ▶ ✓

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here

Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at end of year (line 4 minus line 5)-Part II, column (b), line 30

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

Analysis of Changes in Net Assets or Fund Balances

instructions

	(a) e the kınd(s) of property sold (e g , re arehouse, or common stock, 200 shs	How acquired P—Purchase D—Donation		(c) ate acquired o , day, yr)	(d) Date sold (mo , day, yr)	
1 a TD AMERTIRADE TRAD	F SLIMMARY	P Dollation	1			
b TD AMERTIRADE TRAD		P				
c 29TH RESIDENTIAL RE			P			
d ALIGN IMPACT FUND			P .	1		
	e ALIGN IMPACT FUND					
e ALIGN IMPACT TOND	(f)		P (g)	+		h)
(e) Gross sales price	(e) Demonstrate allowed Con				Gain o	r (loss)) minus (g)
a	328,318		329,719		(-) (-	-1,401
b	20,000		21,50			-1,507
c	25,555			1		12,049
				1		
d				-		610
е						728
Complete only for asse	ets showing gain in column (h) and ow	ned by the foundation	on 12/31/69			1)
(i) F M V as of 12/31/6	(j) Adjusted basis as of 12/31/69	Excess	(k) of col(ı) (յ), ıf any	со	ol (k), but not	h) gain minus less than -0-) or om col (h))
а						-1,401
b						-1,507
c				+		12,049
d				1		610
						728
e		If gain, also enter in P		+		720
·	ıl gaın or (loss) as defined in sections Part I, line 8, column (c) (see instructi		· · }	3		10,479
Part V Qualification	Under Section 4940(e) for Re	educed Tax on Net	Investment In	come		
For optional use by domestic	private foundations subject to the se	ction 4940(a) tax on ne	et investment incor	ne)		
if section 4940(d)(2) applies,	leave this part blank the section 4942 tax on the distributa	hie amount of any year	In the base period	12	П ∨	es 🗸 No
	not qualify under section 4940(e) Do		in the base period			c3 <u> </u>
·	amount in each column for each year,		making any entrie	25		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab			(d) Distribution rat (b) divided by o	
2015	664,211		5,489,441	, 551	<u>,_, aaca by c</u>	0 120998
2014	516,906		5,821,835			0 088787
2013	2,602,890		6,075,081			0 428454
2013	681,179		6,496,071			0 104860
2012	624,605		7,124,195			0 087674
	<u>'</u>		''''''	1		
2 Total of line 1, column	• •			+		0 830773
	tio for the 5-year base period—divide		, or by the 3			0 166155
	undation has been in existence if less noncharitable-use assets for 2016 fror		4	+		5,314,548
		•		+		
5 Multiply line 4 by line 3			5	+		883,039
	ment income (1% of Part I, line 27b)		6	1		2,199
7 Add lines 5 and 6 .			7			885,238
8 Enter qualifying distrib	utions from Part XII, line 4 ,		8			644,213
8 Enter qualifying distrib			8	ng a 1º	% tax rate Se	644,213

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII and Contractors (continued)	aid Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	> 0
Part IX-A Summary of Direct Charitable Activities	<u> </u>
List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the numbe organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 THE FOUNDATION SUPPORTS EDUCATIONAL AND YOUTH DEVELOPMENT PROGRAMS IN LOS ANGELES AND SANT CRUZ COUNTIES WITH CASH GRANTS, TECHNICAL ASSISTANCE, AND MISSION RELATED INVESTMENTS	644,213
2 THE FOUNDATION SUPPORTS YOUTH PHILANTHROPY AND GRANTMAKING THROUGH ITS NATIONAL PROGRAM	149,623
3	
4	_
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	• 0
	Form 990-PF (2016)

B	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a	nd cei	rtain foreign
Par	organizations check here and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	265,727
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		
c	Add lines 2a and 2b	2c	4,399
3	Distributable amount before adjustments Subtract line 2c from line 1	3	261,328

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

1a

1b

2

За 3b

4

5

644,213

644.213

644,213

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Part XII

1

2

3

4

5

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

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

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

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

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

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

Page 9

261.328

261.328

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0

_	_	٠	١.	1	_	_	_	٠
1	X	ı	ŧ					Į

b Total for prior years

c From 2013. .

From 2011. . . .

b From 2012.

d From 2014.

e From 2015.

XII, line 4 > \$

indicated below:

Form 990-PF (20	016)	
Part XIII	Undistributed Income	(see instructions)

1 Distributable amount for 2016 from Part XI, line 7

a Enter amount for 2015 only.

Excess distributions carryover, if any, to 2016

f Total of lines 3a through e.

d Applied to 2016 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2016

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2017.

10 Analysis of line 9 a Excess from 2012. .

b Excess from 2013. .

d Excess from 2015. .

e Excess from 2016. . .

c Excess from 2014. . . .

(If an amount appears in column (d), the

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount —see instructions e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions 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

4 Qualifying distributions for 2016 from Part

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).

- 2 Undistributed income, if any, as of the end of 2016

272,250 360,415

2.302.898 231,585

393,266

360.415 2,302,898

231.585

393.266

382.885

Corpus

3,560,414

382.885

3.943.299

272,250

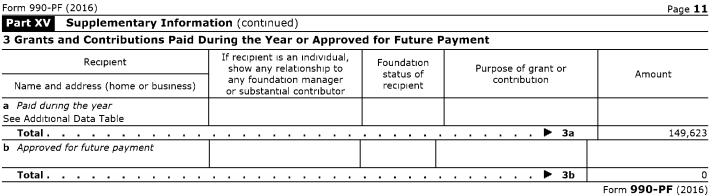
3,671,049

(a)

(b)

- Years prior to 2015

(c)



Enter gross amounts unless otherwise indicated		Activities		Fredrick & Street	(e)	
nter gross	s amounts unless otherwise indicated	(a)	(b)	Excluded by section	(d)	Related or exempt function income
_	n service revenue	Business code	Amount	Exclusion code	Amount	(See instructions
	IFERENCE REGISTRATION FEES					68,30
	and contracts from government agencies					
_	ership dues and assessments					
	est on savings and temporary cash					
	tments					
	nds and interest from securities					240,82
5 Net rer	ntal income or (loss) from real estate					
a Debt	-financed property					
	lebt-financed property					
5 Netre	ental income or (loss) from personal property					
7 Other	nvestment income					
	or (loss) from sales of assets other than					
	tory					10,479
	come or (loss) from special events					
	profit or (loss) from sales of inventory					
1 Other						
	RESIDENTIAL K-1			01	2,463	
b ALIGN	I IMPACT FUND K-1			01	-164	
					207	
c ALIGN	IMPACT FUND K-1			01	207	
c ALIGN				01	207	
c <u>ALIGN</u> d e						
c <u>ALIGN</u> d e			(2,506	319,601
c ALIGN d e 2 Subtot 3 Total.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	ns)				
c ALIGN d e 2 Subtot 3 Total. Gee works	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculatio	ns)		13	2,506	319,601
c ALIGN d e 2 Subtot 3 Total. Gee works	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) theet in line 13 instructions to verify calculation. Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplishr Income is reported	nent of Exem	pt Purposes of Part XVI-A contribu	2,506 3ted importantly to	319,600 322,107
c ALIGN d e 2 Subtot 3 Total. See works Part XV Line No.	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) The Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions)	ns) e Accomplishr Income is reported	nent of Exem	pt Purposes of Part XVI-A contribu	2,506 3ted importantly to	319,600 322,107
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c ALIGN d e 2 Subtot 3 Total. See works Part XV Line No.	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) The Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions)	ns) e Accomplishr Income is reported	nent of Exem	pt Purposes of Part XVI-A contribu	2,506 3ted importantly to	319,60 322,107
c ALIGN d e 2 Subtot 3 Total. See works Part XV Line No.	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) The Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions)	ns) e Accomplishr Income is reported	nent of Exem	pt Purposes of Part XVI-A contribu	2,506 3ted importantly to	319,60 322,107
c ALIGN d e 2 Subtot 3 Total. See works Part XV Line No.	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) The Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions)	ns) e Accomplishr Income is reported	nent of Exem	pt Purposes of Part XVI-A contribu	2,506 3ted importantly to	319,60 322,107
c ALIGN d e 2 Subtot 3 Total. See works Part XV Line No.	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) The Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions)	ns) e Accomplishr Income is reported	nent of Exem	pt Purposes of Part XVI-A contribu	2,506 3ted importantly to	319,60 322,107

Information Regarding Transfers To and Transactions and Relationships With Noncharitable

Part	XVII	Exempt Organiz											
		ganization directly or inc Code (other than section									501	Yes	No
a Trai	nsfers	from the reporting found	dation to a n	oncha	rıtable ex	empt organizat	on (of					
(1)	Cash										1a(1)	No
(2)	Othe	rassets									1a(2)	No
b Other transactions													
(1) Sales of assets to a noncharitable exempt organization											1b(1)	No
(2) Purchases of assets from a noncharitable exempt organization											. 1b(2	_	No
		al of facilities, equipmen	•						•		. 1b(3		No
		bursement arrangement							•		1b(4	_	No
		s or loan guarantees.							•		1b(5	+	No
		mance of services or me	•		-						1b(6)	<u>'</u>	No
	-	facilities, equipment, maker to any of the above			•						Lot value		No
		ds, other assets, or serv											
ın a	ny tra	nsaction or sharing arrai	ngement, sh	ow in	column (d	d) the value of	the	goods, other a	sset	s, or services received			
(a) Line	No I	(b) Amount involved	(c) Name of	noncha	aritable eve	mpt organization	ı	(d) Description	n of t	ransfers, transactions, an	t charing arr	andemer	nte
(a) Line	INC	(b) Amount involved	(C) Name of	HOHEHE	ilitable exe	impt organization	+	(d) Description	11 01 0	i alisiers, cransaccions, an	a snaring an	angemei	11.5
							_						
							\perp						
	_						+						
	-+						+						
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							+						
					1.1	1.	Щ.			•			
		ndation directly or indire	•			•			-		☐Yes	☑ N	1-
		in section 501(c) of the	•	tnan	section 50	J1(c)(3)) or in s	ecti	ion 52//			∟ Yes	T 1	NO
D IT Y	res, c	omplete the following so (a) Name of organizatio				b) Type of organiz	zatioi	n I		(c) Description of	alationshin		
		(a) Name of organization	<u>''' </u>		,	b) Type of organiz	atio			(c) Description of	Ciacionsinp		
		er penalties of perjury, : ly knowledge and belief,											
Sign		iy knowledge and beller, :h preparer has any kno		orrect,	and com	piete Deciarati	on c	or preparer (otr	ner	nan taxpayer) is base	on all into	ormatio	пот
Here		*****				2017-10-12		*****	c	May	the IRS disci	uss this i	eturn
пеге	 -							_)			the preparer		
	' :	Signature of officer or tr	rustee			Date		▼ Title		(see	ınstr)? 🗹	Yes ∐ I	No
		Print/Type preparer's	name	Prena	arer's Sigi	nature		Date		PTI			
								Date		Check if self-		7020	
		JEFFREY A BROWN						2017.00.10	,	employed ▶ 🔲	P0055	/030	
Paid		JEITREI A BROWN						2017-09-18	ة				
Prep	arer	Firm's name ▶ JEFF	BROWN PC	<u> </u>				1					
Use (Only									Firn	n's EIN ▶20	J-4909!	532
		Firm's address ► 15	5 SANSOME	STREE	ET 620								
		SA	N FRANCISC	O, CA	94104					Pho	ne no (41	5) 644-	5300
				_,									

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If Expense account, (d) hours per week not paid, enter Contributions to (e) other allowances -0-) (b) devoted to position employee benefit plans and deferred compensation ALAN C FOX PRESIDENT 0 3 00 12411 VENTURA BLVD STUDIO CITY, CA 91604 SCOTT SEMEL DIRECTOR 0 0 1 00 12411 VENTURA BLVD STUDIO CITY, CA 91604 DAVEEN FOX VΡ 0 1 00 12411 VENTURA BLVD STUDIO CITY, CA 91604 CATHY REYNOLDS **TREASURER** 0 0 1 00 12411 VENTURA BLVD STUDIO CITY, CA 91604 ALEXIS MARION 0 **SECRETARY** 10 00 12411 VENTURA BLVD STUDIO CITY, CA 91604 KATIE MARCUS REKER DIRECTOR 0 10 00 12411 VENTURA BLVD STUDIO CITY, CA 91604 **HEATHER FOX** DIRECTOR 0 0 1 00 12411 VENTURA BLVD STUDIO CITY, CA 91604 CAROLYN FOX DIRECTOR 0 1 00 12411 VENTURA BLVD STUDIO CITY, CA 91604 ASHA BLAKE DIRECTOR 0 1 00 12411 VENTURA BLVD STUDIO CITY, CA 91604 NANCY GOMEZ 0 DIRECTOR 1 00 12411 VENTURA BLVD STUDIO CITY, CA 91604 CONNIE LORICK DIRECTOR 0 1 00 12411 VENTURA BLVD STUDIO CITY, CA 91604

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager

recipient

501(C)(3)

LEADERSHIP

10,000

149,623

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
FOOD WHAT 1156 HIGH STREET SANTA CRUZ, CA 95064	NONE	501(C)(3)	LEADERSHIP	15,000
A PLACE CALLED HOME 2830 SOUTH CENTRAL AVENUE LOS ANGELES, CA 90011	NONE	501(C)(3)	MENTORSHIP	3,000
ALGALITA MARINE RESEARCH FOUNDATION 148 N MARINA DRIVE LONG BEACH, CA 90803	NONE	501(C)(3)	MARINE RESEARCH	2,000
BIG BROTHERS BIG SISTERS OF SANTA CRUZ COUNTY	NONE	501(C)(3)	MENTORSHIP	5,000

1500 41ST AVE SUITE 250 CAPITOLA, CA 95010

WATSONVILLE, CA 95076

Total .

За

DIGITAL NEST 1961 MAIN STREET 221

NONE

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

DIY GIRLS PO BOX 330662 PACOIMA, CA 91333	NONE	501(C)(3)	MENTORSHIP	5,000
EMG ENTERPRISE PO BOX 561338	NONE	501(C)(3)	LEADERSHIP	9,000

EMG ENTERPRISE PO BOX 561338 LOS ANGELES, CA 90056	NONE	501(C)(3)	LEADERSHIP	9,000
EMPOWHER INSTITUTE 1055 WILSHIRE BLVD SUITE 1660 LOS ANGELES, CA 90017	NONE	501(C)(3)	MENTORSHIP	5,000

2007111022207 071 30000				
EMPOWHER INSTITUTE 1055 WILSHIRE BLVD SUITE 1660 LOS ANGELES, CA 90017	NONE	501(C)(3)	MENTORSHIP	5,000
EXPONENT PHILANTHROPHY 1720 N STREET NW	NONE	501(C)(3)	OPERATING	2,500

LOS ANGELES, CA 90017				
EXPONENT PHILANTHROPHY 1720 N STREET NW WASHINGTON, DC 20036	NONE	501(C)(3)	OPERATING	2,500

1720 N STREET NW WASHINGTON, DC 20036	NONE	301(C)(3)	OPERATING	2,500
FROM K-1 (ALIGN IMPACT FUND)	NONE	501(C)(3)	GENERAL SUPPORT	2

WASHINGTON, DC 20036				
FROM K-1 (ALIGN IMPACT FUND) 429 SANTA MONICA BOULEVARD 500 SANTA MONICA, CA 90401	NONE	501(C)(3)	GENERAL SUPPORT	2

149,623

FROM K-1 (ALIGN IMPACT FUND) 429 SANTA MONICA BOULEVARD 500 SANTA MONICA, CA 90401	NONE	501(C)(3)	GENERAL SUPPORT	

Total .

За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year GRADES OF GREEN 519 MAIN STREET NONE 501(C)(3) LEADERSHIP 2,000 EL SEGUNDO, CA 90245 HEART OF LOS ANGELES YOUTH NONE 501(C)(3) YOUTH PROGRAM 1,000 2701 WILSHIDE BLVD SHITE 100

LOS ANGELES, CA 90057				
HOME FOREVER 3553 ATLANTIC AVENUE 1155 LONG BEACH, CA 90807	NONE	501(C)(3)	PROGRAM	2,000
HUNTINGTON BEACH SEARCH & RESCUE 18381 GOTHARD STREET HUNTINGTON BEACH, CA 92648	NONE	501(C)(3)	LEADERSHIP	2,000

LA LGBT CENTER NONE 501(C)(3) YOUTH PROGRAM 1625 N SCHRADER BLVD

LOS ANGELES, CA 90028

Total .

3a

2,000

149,623

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

MENTOR TUTOR CONNECTION PO BOX 1473 LOS ALTOS, CA 90807	NONE	501(C)(3)	MENTORSHIP	5,000
NO LIMITS THEATER GROUP INC 9801 WASHINGTON BLVD 2ND FLOOR CULVER CITY, CA 90232	NONE	501(C)(3)	MENTORSHIP	3,000
OPERATION JUMP START	NONE	501(C)(3)	MENTORSHIP	3,000

COLVER CITY, CA 90232				
OPERATION JUMP START 3515 LINDEN AVENUE LONG BEACH, CA 90807	NONE	501(C)(3)	MENTORSHIP	3,000
POWER 4 YOUTH PO BOX 28607 E 3RD STREET LONG BEACH, CA 90802	NONE	501(C)(3)	MENTORSHIP	4,000

OPERATION JUMP START 3515 LINDEN AVENUE LONG BEACH, CA 90807	NONE	501(C)(3)	MENTORSHIP	3,1
POWER 4 YOUTH PO BOX 28607 E 3RD STREET LONG BEACH, CA 90802	NONE	501(C)(3)	MENTORSHIP	4,1

LONG BEACH, CA 90807				
POWER 4 YOUTH PO BOX 28607 E 3RD STREET LONG BEACH, CA 90802	NONE	501(C)(3)	MENTORSHIP	4,000
SANTA CRUZ WRITES 400 ENCINAL	NONE	501(C)(3)	MENTORSHIP	5 000

PO BOX 28607 E 3RD STREET LONG BEACH, CA 90802				
SANTA CRUZ WRITES 400 ENCINAL SANTA CRUZ, CA 95060	NONE	501(C)(3)	MENTORSHIP	5,000

149,623

SANTA CRUZ WRITES 400 ENCINAL SANTA CRUZ, CA 95060	NONE	501(C)(3)	MENTORSHIP	
Total				

3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Purpose of grant or Amount Recipient show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SENDEROS 804 N BRANCIFORTE AVE NONE 501(C)(3) **PROGRAM** 2,000 SANTA CRUZ, CA 95062 NONE 5,000 SPARK LA 501(C)(3) **MENTORSHIP**

501(C)(3)

501(C)(3)

501(C)(3)

LEADERSHIP

YOUTH PROGRAM

YOUTH LEADERSHIP PROGRAM

25,000

1,000

2,000

149,623

NONE

NONE

NONE

251 RHODE ISLAND ST SUITE 205 SAN FRANCISCO, CA 94103 TEENS EXPLORING TECHNOLOGY

3655 SOUTH GRAND AVENUE 220 LOS ANGELES, CA 90007 THE OUTDOOR SCHOOL

2680 HIGHWAY 154 SANTA BARBARA, CA 93105 THE THEATER OFFENSIVE

565 BOYLSTON ST BOSTON, MA 02116

> Total . . 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year THERASURF PO BOX 4063 NONE 501(C)(3) YOUTH PROGRAM 2,000 MALIBU, CA 90264 UNCHAINED PO BOX 441 NONE 501(C)(3) YOUTH MENTORSHIP PROGRAM 3,000 SQUEL, CA 95073 VENICE ARTS 1702 LINCOLN BLVD NONE 501/C)/3) VOLITH MENTOPSHIP PROCESM 3 000

VENICE, CA 90291	NONE	301(0)(3)	TOOTH MENTORSHIP PROGRAM	3,000
YOUTH MENTORING ACTION NETWORK PO BOX 1633 CLAREMONT, CA 91711	NONE	501(C)(3)	YOUTH MENTORSHIP PROGRAM	5,000
YOUTH MENTORING CONNECTION 1818 SOUTH WESTERN AVENUE SUITE	NONE	501(C)(3)	YOUTH MENTORSHIP PROGRAM	3,000

505

LOS ANGELES, CA 90006

Total . . 149,623

3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year YOUTH NOW 124 EAST LAKE NONE 501(C)(3) YOUTH MENTORSHIP PROGRAM 5,000 WATSONVILLE, CA 95076

YOUTH PHILANTROPY INITIATIVE OF INDIANA 32 EAST WASHINGTON ST INDIANAPOLIS, IN 42604	NONE	501(C)(3)	GENERAL OPERATING SUPPORTONLINE HUB DEVELOPMENT	150
YOUTH SPEAK COLLECTIVE	NONE	501(C)(3)	YOUTH PROGRAM	7.971

INDIANAPOLIS, IN 42604			5242201112111	
YOUTH SPEAK COLLECTIVE 444 S BRAND STREET SUITE 201 SAN FERNANDO CA 91340	NONE	501(C)(3)	YOUTH PROGRAM	

YOUTH SPEAK COLLECTIVE 444 S BRAND STREET SUITE 201 SAN FERNANDO, CA 91340	NONE	501(C)(3)	YOUTH PROGRAM	

Total .

За

K COLLECTIVE DISTREET SUITE 201 DO, CA 91340	NONE	501(C)(3)	YOUTH PROGRAM	

149,623

YOUTH SPEAK COLLECTIVE	NONE	501(C)(3)	YOUTH PROGRAM	/,
444 S BRAND STREET SUITE 201				
SAN FERNANDO, CA 91340				
				-

efile GRAPHIC print - DO NOT P	ROCESS As Filed D	ata -	DL	.N: 93491285006187			
TY 2016 Accounting Fees Schedule							
	Name: FRIEDA (EIN: 95-4775	C FOX FAMILY FOUN	NDATION				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
ACCOUNTING	5,163	0	0	5,163			

TY 2016 General Explanation Attachment	

Name: FRIEDA C FOX FAMILY FOUNDATION

EIN: 95-4775770

General Explanation Attachment

Identifier	Return Reference	Explanation	
1	TRANSACTIONS WITH A DISQUALIFIED PERSON	PART VII-B, QUESTION 1A (4)	THE FOUNDATION LEASES EMPLOYEES FROM A COMPANY OWNED BY ALAN FOX, ACF MANAGEMENT, INC EIN 95-2513180 ALAN FOX IS THE PRESIDENT OF THE FOUNDATION AND ONE ITS DIRECTORS THE FOUNDATION REIMBURSES ALAN FOX'S COMPANY FOR ONLY THE DIRECT COSTS OF THE PERSONNEL WHO WORK STRICTLY FOR THE FOUNDATION AND OTHER EXPENSES PAID ON BEHALF OF THE FOUNDATION THERE ARE NO ADDITIONAL FEES PAID THIS TRANSACTION QUALIFIES AS AN "EXCEPTED" ACT UNDER IRS REGULATION 53 4941(D)-1(B)(1)(II), A TRANSACTION THAT IS AT LEAST AS FAVORABLE TO THE FOUNDATION AS AN ARM'S LENGTH TRANSACTION WITH AN UNRELATED PERSON

DLN: 93491285006187

Name: FRIEDA C FOX FAMILY FOUNDATION

FTN: 95-4775770

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

	33 1773770		
Name of E	Bond	End of Year Book Value	End of Year Fair Market Value
CORPORATE BONDS		647,005	647,005

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491285006187
TY 2016 Investments Governments	nent Obligat	ions Schedule	
	_		
Name:	FRIEDA C FOX	FAMILY FOUNDATION	
EIN:	95-4775770		
US Government Securities - End of Year Book Value:		443,040	
US Government Securities - End of Year Fair Market Value:		443,040	
State & Local Government Securities - End of Year Book Value:		1,305,605	
State & Local Government Securities - End of Year Fair Market Value:		1,305,605	

DLN: 93491285006187

Name: FRIEDA C FOX FAMILY FOUNDATION

ETN: 05-4775770

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
OTHER INVESTMENTS	FMV	2,452,680	2,452,680
ALIGN IMPACT FUND	AT COST	119,105	119,105

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491285006187
TY 2016 Other Decreases Scho	edule	
Name:	FRIEDA C FOX FAMILY FOUNDATION	
EIN:	95-4775770	
De	escription	Amount
FEDERAL INCOME TAX		1,527

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491285006187
TY 2016 Other Expenses Sche	dule			
Name:	FRIEDA C FOX FAM	1ILY FOUNDAT	TON	
EIN:	95-4775770			
Other Expenses Schedule				1

8,842

26,117

7,080

1,660

1,115

2,570

15,838

301

900

74

Income

0

0

0

0

0

0

0

0

15,838

301

Income

0

0

0

0

0

0

0

0

0

0

Disbursements for

Charitable

Purposes

8,842

26,117

7,080

1,660

900

1,115

74 2,570

ı	Cabadula

INFORMATION TECHNOLOGY

OFFICE EXPENSES

MERCHANT FEES

TELEPHONE

INSURANCE

TRAINING

ADVERTISING

PROFESSIONAL DUES

INVESTMENT EXPENSES

INVESTMENT INTEREST

Description	Revenue and	Net Investment	Adjusted Net			
Other Expenses Schedule						
EIN: 95-4775770						

Expenses per Books

Description	Revenue and	Net Investment	4
Other Expenses Schedule			
EIN:	95-4//5//0		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491285006187
		_
TY 2016 Other Income Schedul	e	

Name: FRIEDA C FOX FAMILY FOUNDATION

EIN: 95-4775770

Other Income Schedule				
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income	
CONFERENCE REGISTRATION FEES	68,300		68,300	
29TH RESIDENTIAL K-1	2,463		2,463	
ALIGN IMPACT FUND K-1	-164		-164	
ALIGN IMPACT FUND K-1	207		207	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491285006187
TY 2016 Other Increases Sche	edule	
Name:	FRIEDA C FOX FAMILY FOUNDA	TION
EIN:	95-4775770	
D	escription	Amount
CHANGE IN UNREALIZED GAINS/LOSSES	5	6,518
ALIGN IMPACT K-1 BOOK TO TAX DIFFE	RENCES	7,459

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 9	93491285006187
TY 2016 Other Professional Fe	es Schedule	1		
Name:	FRIEDA C FOX	FAMILY FOUND	ATION	
EIN:	95-4775770			

EIN: 95-4775770				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

15,189

56,569

56,569

15,189

CONTRACT SERVICES

INVESTMENT MGMT FEES

efile GRAPHIC print - DO NOT PRO	OCESS As Filed Data	-	DLN	l: 93491285006187
TY 2016 Taxes Schedule				
Name: FRIEDA C FOX FAMILY FOUNDATION EIN: 95-4775770				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LICENSES & FEES	910	0	0	910
LICENSES & FEES PAYROLL TAXES	910 14,232	0	0	910

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491285006187					
Schedule B (Form 990, 990-EZ,	Schedule of Contributors		-	OMB No 1545-0047	
or 990-PF) Department of the Treasury Internal Revenue Service	990-PF) ► Attach to Form 990, 990-EZ, or 990-PF Description of the Treasury ► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at		2016		
Name of the organizat		[1	Employer ide	entification number	
			95-4775770		
Organization type (ch	eck one)				
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number) organization				
	4947(a)(1) nonexempt charitable trust not	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				
•	ation filing Form 990, 990-EZ, or 990-PF that received r property) from any one contributor. Complete Parts I		_	•	
Special Rules					
under sections received from a	tion described in section 501(c)(3) filing Form 990 or 909(a)(1) and 170(b)(1)(A)(vi), that checked Schedule by one contributor, during the year, total contributions the 1h, or (ii) Form 990-EZ, line 1 Complete Parts I an	A (Form 990 or 990-EZ), Par of the greater of (1) \$5,000 o	rt II, lıne 13, 1	6a, or 16b, and that	
during the year.	tion described in section 501(c)(7), (8), or (10) filing Fe total contributions of more than \$1,000 exclusively for the prevention of cruelty to children or animals. Comp	r religious, charitable, scientifi			
during the year, If this box is che purpose Do no	tion described in section 501(c)(7), (8), or (10) filing Fecontributions exclusively for religious, charitable, etc., seked, enter here the total contributions that were recessive complete any of the parts unless the General Rule able, etc., contributions totaling \$5,000 or more during	purposes, but no such contri lived during the year for an exp pplies to this organization bea	ributions totale x <i>clusively</i> reli cause it rece	ed more than \$1,000 gious, charitable, etc , ived <i>nonexclusively</i>	
990-EZ, or 990-PF), bu	on that is not covered by the General Rule and/or the stit must answer "No" on Part IV, line 2, of its Form 99 Form 990PF, Part I, line 2, to certify that it does not me	0, or check the box on line H	of its		
For Paperwork Reduction for Form 990, 990-EZ, or 9	Act Notice, see the Instructions Cat No 3	30613X Schedule	B (Form 990,	990-EZ, or 990-PF) (2016)	

Name of organi RIEDA C FOX FA	zation MILY FOUNDATION	Employer identification 95-4775770	number
Part I	Contributors (see instructions) Use duplicate copies of Part I if ac	dditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ACF PROPERTY MANAGEMENT INC		Person 🗸 Payroll
	12411 VENTURA BOULEVARD	\$ 38,930	Noncash
	STUDIO CITY, CA91604		(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
-			Payroll
		\$	Noncash
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
-			Payroll
		\$	Noncash
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
-			Payroll
		\$	Noncash
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
-			Payroll
		\$	Noncash
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
-			Payroll
		\$	Noncash
			(Complete Part II for noncash contributions)
		Schedule B (Fe	orm 990, 990-EZ, or 990-PF) (2016)

Schedule B (Form 99	0, 990-EZ, or 990-PF) (2016)		Page 3
Name of organization FRIEDA C FOX FAMILY FOUNDATION		Employer ident	ification number
		95-47	775770
Part II	Noncash Property		
(a) No.from Part I	(see instructions) Use duplicate copies of Part II if additional space is needed (b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
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		Schedule B (Form	990, 990-EZ, or 990-PF) (2016)

Schedule B (Form 9	990, 990-EZ, or 990-PF) (2016)		Page 4
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	Transferee's name, address, and	(e) Transfer of gift ZIP 4 F	Relationship of transferor to transferee
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