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Form 990-PF

Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form as it may be made public.

_			bout Form 990-PF and its se					i to Public inspection
_		ndar year 2016 or tax year begi	inning 7/	<u>/1/2016</u>	, and	ending	6/30/2017	
	ame of fo					A Employer	r identification number	•
		UNDATION, INC.						
		d street (or P.O box number if mail is not	delivered to street address)	Roor	n/surte	l 	20-3362453	
		OLLIN 124 PROSPECT ST				B Telephone	e number (see instructio	ns)
	•	n, state or province, country, and ZIP or for	• •				040 707 05 1	•
	<u>DGEW</u>		NJ	07450		ļ	212-785-261	
Fo	reign cou	untry name Foreig	n province/state/county	Foreign post	tal code	C If exempt	ion application is pendin	ıg, check here ▶ 🗀
				- 				
G	Check	k all that apply 🔃 Initial returi	=	of a former public o	charity	D 1. Foreig	n organizations, check h	nere ► L
		∐ Final return	=	turn			n organizations meeting	
		Address ch					here and attach comput	
Н		type of organization. 💢 Sec					foundation status was te 07(b)(1)(A), check here	rminated under
	Section	on 4947(a)(1) nonexempt charita	ble trust	able private founda	ition	300001750	or (b)(1)(ry, one or nore	,
1	Fair m	narket value of all assets at	J Accounting method	X Cash A	Accrual	E Is about to	detre in in a CO month	tormination
-	end o	f year (from Part II, col (c),	Other (specify)				ndation is in a 60-month ction 507(b)(1)(B), check	
			(Part I, column (d) must be	e on cash basis.)			, , , , ,	
P	art l	Analysis of Revenue and Exp)			(d) Disbursements
		amounts in columns (b), (c), and ((a) Revenue and expenses per		tinvestment	(c) Adjusted net	for chantable
		equal the amounts in column (a) (books	["	ncome	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., recei		1,073,350		Strange Co	1. 电标准数据	The state of the state of the
	1	Check ► if the foundation is no	•	1,070,030		2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	10 mg 1 mg 1 mg	170, 124, 11
	2	Interest on savings and tempor		· · · · · · · · · · · · · · · · · · ·		<u> </u>		
	4	Dividends and interest from sec	•	4,936	·	4,936		1 7 7
	5a	Gross rents	Juliuos	4,000	 	-1,000		
	b	Net rental income or (loss)		1.0	N . 3.	(e, m + e , e ,	F 19 F 1 F 19 1	1 10 2
a	6a	Net gain or (loss) from sale of a	esets not on line 10	1,048	3.3	N. 15 N. 4436	Vince 14 1 17	7,7 200
Revenue	b	Gross sales price for all assets on line			1000		En . La Carrier . La .	
ē	7	Capital gain net income (from F		F 1 1 2 4 1 1 1	3,6,20	1,048	17,54,45	
è	8				 	1,040 W. F. J. J. J.	22.10	
	9		<i>.</i>			12.5 mg 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	 	7
	10a	Gross sales less returns and allowant	1	7,4		11.4.12.3.	\$ 1 mar. 10	
	b	Less Cost of goods sold			7.3	A - 12 & 25 S	x 2 x - 1	
	C	Gross profit or (loss) (attach so			-	A STATE OF THE STA		2,002
	11	Other income (attach schedule)			-:	, , , , , , , , , , , , , , , , , , ,	0	5.25
	12	Total. Add lines 1 through 11		1,079,334		5,984	RECET,0	25
_	13	Compensation of officers, direct		1,070,004	 	10,007	5/ 6/2	- Land
ses	14	Other employee salaries and w			 		BI WUV Zn 9	12 [2]
_	15	Pension plans, employee bene	_	<u> </u>	 			1// /:9/
ĝ	16a	Legal fees (attach schedule) .		 	 		OGDEN	2/
Operating and Administrative Exper	b	Accounting fees (attach schedu		3,760	1		1	 - -
Ve	C	Other professional fees (attach		16,710		16,710		
äŧi	17	Interest		1,954		1,954		
str	18	Taxes (attach schedule) (see in		25		1,004	 	
Ë	19	Depreciation (attach schedule)	•		 			130 A
Ē	20	Occupancy			\vdash		 	
Ad	21	Travel, conferences, and meeti			 			1
ַק	22				 		 	
a	23	Other expenses (attach schedu		340	 			
g	24	Total operating and administr	•	<u> </u>	 		 	
Ę		Add lines 13 through 23		22,789	.]	18,664	.ì c	ol c
er	25	Contributions, gifts, grants paid		22,700		10,00 <u>1</u>		
d	26	Total expenses and disbursements		22,789		18,664		
_		Subtract line 26 from line 12.		22,769	142.2	10,004	CV)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	27	Excess of revenue over expenses	and dichurcoments	1,056,545	4m 8m			TEN SE
	a	Net investment income (if neg		1,050,545	\ 	0		2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/
	b	Adjusted net income (if negative	- ·	3	 -	i.		THE STATE OF THE S

Ю	art:ll	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End	of year
		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	14,252	71,69	
	2	Savings and temporary cash investments	181,746	1,257,554	1,257,554
	3	Accounts receivable >	,	1	# T = T =
	ĺ	Less, allowance for doubtful accounts	1		1
	4	Pledges receivable		,	
		Less allowance for doubtful accounts			-
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other	<u> </u>		
	١	disqualified persons (attach schedule) (see instructions)]		1
	7				<u> </u>
	' '	Other notes and loans receivable (attach schedule)		. يا حدثند .	
۰,	1	Less. allowance for doubtful accounts			
Assets	8	Inventories for sale or use	ļ		
SS	9	Prepaid expenses and deferred charges			
4	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	2,236,528	2,159,826	2,574,078
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis		1	2.2.2.
	ĺ	Less accumulated depreciation (attach schedule)].	,	
	12	Investments—mortgage loans	7		
	13	Investments—other (attach schedule)			
		Land, buildings, and equipment basis			
		Less: accumulated depreciation (attach schedule)	`a	والمحادث المحادث	
Ì					 -
ļ		Other assets (describe Total assets (to be completed by all filers—see the			
			0.400.500	2 400 074	0.000.000
		instructions. Also, see page 1, item I)	2,432,526	3,489,071	3,903,323
		Accounts payable and accrued expenses			
S.		Grants payable			
Liabilities	i	Deferred revenue			
詞		Loans from officers, directors, trustees, and other disqualified persons			
ia.		Mortgages and other notes payable (attach schedule)			■食具体の セ
_		Other liabilities (describe)			ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا
	23	Total liabilities (add lines 17 through 22)	0	(
		Foundations that follow SFAS 117, check here			J. J. J. J. 19
alances		and complete lines 24 through 26 and lines 30 and 31.			大 克。
ĕ∣	24	Unrestricted			
등		Temporarily restricted		 _	
<u> </u>		Permanently restricted			1 数3 -
Assets or Fund B		Foundations that do not follow SFAS 117, check here			
ᆲ		and complete lines 27 through 31.	İ		
5		Capital stock, trust principal, or current funds			1 1
S				· 	\dashv
i g		Paid-in or capital surplus, or land, bldg., and equipment fund	0.400.500	0.400.07	出議の登り
is		Retained earnings, accumulated income, endowment, or other funds	2,432,526	3,489,07	日は32年2年3月1日 1157 。
اید		Total net assets or fund balances (see instructions)	2,432,526	3,489,07	
Net		Total liabilities and net assets/fund balances (see			
		instructions)	2,432,526	3,489,07	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
_	rt III	Analysis of Changes in Net Assets or Fund Balances			
1	Total r	net assets or fund balances at beginning of year—Part II, column (a)	, line 30 (must agree v	vith	
	end-of	f-year figure reported on prior year's return)		<u>. 1</u>	2,432,526
2		amount from Part I, line 27a		2	1,056,545
					,,,,,,,,
		nes 1, 2, and 3			3,489,071
5	Decres	ases not included in line 2 (itemize)			0,300,071
6	Total	net assets or fund balances at end of year (line 4 minus line 5)—Part	t II. column (b) line 30	6	3,489,071
		and a fine of the art	, ooidiiii (o), iiilo oo		Form 990-PF (2016)
					rom 33U-FF (2016)

20-	3362453 _{Pa}	ge 3
ed	(d) Date sold (mo , day, yr)	
012		017
010		
	<u> </u>	
) Gair olus (t	n or (loss) (f) minus (g)	
		497
	1,	<u>545</u>
ut not	l (h) gain minus t less than -0-) or rom col (h))	
		497
	1,	<u>545</u>
	· · · · · · · · · · · · · · · · · · ·	
		_
	1,	048
		•
		<u> </u>
	☐ Yes 汉	No
Dist	(d) stribution ratio divided by col. (c))	
	0.002	
	0.000	
	0.076	
	O.090 O.271	
_		
	0.441	<u>316</u>
	0.088	263
	3,236,	<u>394</u>
	285,	<u>654</u>
	·	0
	285,	654

Part	V Capital Gains an	d Losses for Tax on Investr	nent Income			
		the kind(s) of property sold (e.g., real estate ouse, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquire (mo , day, yr)	
1a	EDENBROOK VAL FUND)		Р	1/1/2	012 6/30/2017
b	NIGHTWATCH			Р	10/1/2	010 6/30/2017
c						
<u>d</u>				<u> </u>		
<u>e</u>			·			
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale) Gain or (loss) plus (f) minus (g)
a				497		
b	1,545					1,545
c					<u></u> .	
<u>d</u>						
<u> e </u>	<u>,</u>		L			
	Complete only for assets sl	howing gain in column (h) and owned	by the foundation	on 12/31/69	(I) Gains	s (Col (h) gain minus
	(i) F.M.V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i) (j), if any		ut not less than -0-) or ses (from col (h))
а			_			-497
b						1,545
с						
d						
е						
2	Capital gain net income or	(Det capital loss) 1	also enter in Pai , enter -0- in Par	· · · · · ·	2	1,048
3	•	or (loss) as defined in sections 1	222(5) and (6)			
		line 8, column (c) (see instruction	is) if (loss), ente	er -0- in }		0
Part		der Section 4940(e) for Redu	· · · · · ·	lot lavontmont	Income	0
Was t		e this part blank. section 4942 tax on the distributal qualify under section 4940(e). Do			e period?	☐ Yes 🏿 No
1	Enter the appropriate amo	unt in each column for each year,	see the instruct	ions before makir	g any entries	
	(a)	(b)		(c)	<u> </u>	(d)
Cale	Base period years endar year (or tax year beginning in)	Adjusted qualifying distributions	Net value	of nonchantable-use as	sets	Distribution ratio
	2015		5,000	2.387	7,357	O.002094
	2014		0		3,102	0.000000
	2013	203	3,000		3,574	0.076501
	2012		2,030		1,594	0.090821
	2011		1,014		7,535	0.271900
2	Total of line 1 column (d)				. 2	0.441316
3		or the 5-year base period—divide				0.111010
•	-	ation has been in existence if less		•		0.088263
4	Enter the net value of nonc	charitable-use assets for 2016 fro	m Part X, line 5		. 4	3,236,394
5	Multiply line 4 by line 3 .				. 5	285,654
6	Enter 1% of net investmen	t income (1% of Part I, line 27b)		· · · · · · · · ·	. 6	0
7	Add lines 5 and 6				. 7	285,654
8	Enter qualifying distribution	ns from Part XII, line 4 ter than line 7, check the box in P				/ tay rate. See the
	Part VI instructions		ait vi, iiiib ib, di	no complete triat	partusing a 17	DIANIAIC. SEE ITIE

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see inst	tructi	ons)			
1a	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)	- 12 (1) - 12 (1) - 12 (1)	36, 1			1
b						
c	here ▶ ☐ and enter 1% of Part I, line 27b					
_	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_	 		0	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4_	- -			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	<u>5</u>	ي پيپ	7.5	0	<u> </u>
6	Credits/Payments.	7				
a	2016 estimated tax payments and 2015 overpayment credited to 2016 Exempt foreign organizations—tax withheld at source 6a 2,155 6b		2 2		٠ ١٠ .	
b			1		روي شر	Į.:*
C	Tax paid with application for extension of time to file (Form 8868) 6c	Total	4	ant.	,	μ,
d 7	Total credits and payments Add lines 6a through 6d	7	72.5		1 15	ļ
7		-	-		2 <u>,155</u>	
8 9	Enter any penalty for underpayment of estimated tax. Check here	8 9	 		0	-
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	 		2,155	
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax	11	 		-, 100 0	<u> </u>
	VII-A Statements Regarding Activities		<u> </u>			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	t		18 11.11	Yes	No
•••	participate or intervene in any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see					
	Instructions for the definition)?			1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materia	Is		350	- g 1	• ; (
	published or distributed by the foundation in connection with the activities			2	·	
С	Did the foundation file Form 1120-POL for this year?			1c	. 23	X
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			- Y	* *	- 1
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶\$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impo	sed		4,740	المريان	1.17
	on foundation managers. ▶ \$			3.	,	- 15
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		•	2	" " `	X
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			3,0	, ;	. 1
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?			4b	N/A	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T.			4	***	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.			in the		1.5 1.54
	By language in the governing instrument, or				13.4	
	• By state legislation that effectively amends the governing instrument so that no mandatory directions the			22.55	184 ·	3.
	conflict with the state law remain in the governing instrument?			6	_X_	L
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV			7	Χ	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			1		~ ~
	DE				4	1112
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gene					4
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		•	8b	X	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(學到	T.	A. E.
	or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)	? If				
	"Yes," complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing a names and addresses			10		X

Page 5

Pai	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) .	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified]
	person had advisory privileges? If "Yes," attach statement (see instructions).	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	<u> </u>
	Website address ► N/A			
14	The books are in care of ► LONNIE WOLLIN Telephone no ► (201) 81	6-840	4	
	Located at ► 124 PROSPECT ST, RIDGEWOOD, NJ ZIP+4 ► 07450			<u></u> -
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here		•	▶ ∟
40	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If	10	*	
	"Yes," enter the name of the foreign country	,	. :	, in 1
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<u> </u>
	File Form 4720 If any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)	٠,	- 7	*/
·u	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	.,, .	, ,	, ,
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	`, "-		· 1
	disqualified person?	* 5	ર્લ 💰	را ج ان ج
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<u>;</u>	- , ,	4
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	. *	4,5	, ,
	the benefit or use of a disqualified person)?	* \$ ` ,	ι'-	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		, 52	د ک _{ور} در خا 1 در دو خا
	foundation agreed to make a grant to or to employ the official for a period after	5 30	-015 -01°	
	termination of government service, if terminating within 90 days.)	, · · · ,	,	
þ	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in	7	5,	• - /² (•
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? .	1b	N/A	
	Organizations relying on a current notice regarding disaster assistance check here		1.1.	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			ا بدیات اله ساسا
_	were not corrected before the first day of the tax year beginning in 2016?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	7.	1	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)).			
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016?		-	
				` •}
b	If "Yes," list the years 20, 20	1	- /	
b	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	, ,	-	[[
	all years listed, answer "No" and attach statement—see instructions.)	2b	N/A	!
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		19/7	1.1
•	► 20 , 20 , 20 , 20	* /		? ,
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	1 .1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	£ - }
	at any time during the year?	` , _		
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or	\ \J.	3" 5" 3	,
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	\ **i	3.3	200
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse	.	1	, F. 4
	of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		15	
	foundation had excess business holdings in 2016)	3b	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		Х

	0-PF (2016) CBIS FOUNDATION, INC.								362453	P	age 6
	VII-B Statements Regarding Activities			4720 l	May Be Re	equire	d (contin	ued)			
5a	During the year did the foundation pay or incur any (1) Carry on propaganda, or otherwise attempt to i			section	4945(e))?		Yes	X No			
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?									,	
	(3) Provide a grant to an individual for travel, study	, or oth	er simılar pur	poses?			Yes	X No	'	1,	
	(4) Provide a grant to an organization other than a section 4945(d)(4)(A)? (see instructions)						☐ Yes	X No		,	•
	(5) Provide for any purpose other than religious, che purposes, or for the prevention of cruelty to child			terary,		nal 	☐ Yes	X No	-1,	7	3
b	If any answer is "Yes" to 5a(1)–(5), did any of the t Regulations section 53.4945 or in a current notice		-	•		-		d in	5b	N/A	• 3
С	Organizations relying on a current notice regarding If the answer is "Yes" to question 5a(4), does the fo	disaste oundatio	er assistance on claim exer	check l	here . from the tax			► []	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		ALL ALL SALE
6a	because it maintained expenditure responsibility for the grant?							4. 16.	A STATE OF THE STA	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
b	Did the foundation, during the year, pay premiums, If "Yes" to 6b, file Form 8870					efit cor			6b		X
	At any time during the tax year, was the foundation a pa If "Yes," did the foundation receive any proceeds o						Yes action?		7b	N/A	\$1.5
Part	VIII Information About Officers, Directors	ors, Tr	ustees, Fo	undati	on Manag	gers, F	lighly Pa	aid Em	ploye	es,	
1	List all officers, directors, trustees, foundation r					e instr	uctions).				
	(a) Name and address	hour	e, and average is per week ed to position	` (If r	mpensation not paid, iter -0-)	emplo	Contributions byee benefit erred compe	plans	(e) Expe	nse acc	
	COLLINS	PRES/	DIR								
	AYSIDE DR,. CORONA DEL MAR, CA 92625		1.00		0						
	_ COLLINS AYSIDE DR CORONA DEL MAR, CA 92625	VP/DIF	3.00		0						
ONNI	E WOLLIN	SECY			,						
124 PF	OSPECT ST RIDGEWOOD, NJ 07450		1.00		0						
								:			
2	Compensation of five highest-paid employees ("NONE."	other th	nan those inc	luded	on line 1—	see ins	structions). If no	ne, ent	er	
	(a) Name and address of each employee paid more than \$50,000		(b) Title, and a hours per w		(c) Compen	sation	(d) Contribution (d) Co	benefit	(e) Expe	ense acc	

(a) Name and address of each employee paid more than \$50,000

NONE

(b) Title, and average hours per week devoted to position

(c) Compensation

(d) Contributions to employee benefit plans and deference compensation

(e) Expense account other allowances

Total number of other employees paid over \$50,000

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid El and Contractors (continued)	mployees,
3 Five high	phest-paid independent contractors for professional services (see instructions). If none, enter "NOI	NE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
Total number o	f others receiving over \$50,000 for professional services	0
		<u>. </u>
Part IX-A	Summary of Direct Charitable Activities	
	on's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of differences convened, research papers produced, etc.	Expenses
1 N/A	a construction of the production of the production production, construction of the production of the pr	 -
1 .11/2		}
2		
		ĺ
3	***************************************	
		
4		ļ
Part IX-B	Summary of Program-Related Investments (see instructions)	L
	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		}
<u> </u>		
Total Add lines	1 Infolian 4	

Form **990-PF** (2016)

Part		n foundat	ions,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	1 1	
	purposes:		
а	Average monthly fair market value of securities	1a	2,877,893
þ	Average of monthly cash balances	1b	407,786
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	3,285,679
е	Reduction claimed for blockage or other factors reported on lines 1a and	1	
	1c (attach detailed explanation)	1 1	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	3,285,679
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see		
	instructions)	4	49,285
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3,236,394
6	Minimum investment return. Enter 5% of line 5	6	161,820
Part 2			
1	Minimum investment return from Part X, line 6	1	161,820
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.)	7 . 1	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	161,820
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	161,820
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	161,820
	Qualifying Distributions (see instructions)		
	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	0
	Program-related investments—total from Part IX-B	1b	
	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		
	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	0
	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whe	ther the for	
	qualifies for the section 4940(e) reduction of tax in those years.		

Par	.Undistributed income (see instructions	S)		· · · · · · · · · · · · · · · · · · ·	
1	Distributable amount for 2016 from Part XI,	(a) Corpus	(b) Years pnor to 2015	(c) 2015	(d) 2016
	line 7				161,820
2	Undistributed income, if any, as of the end of 2016				
а	Enter amount for 2015 only			0	}
b	Total for prior years 20, 20, 20				
3	Excess distributions carryover, if any, to 2016		,	-	٠.
а	From 2011	, ,			
b	From 2012 95,830				\
С	From 2013	1	, , , ,		
d	From 2014	1	, -		, , ,
е	From 2015	1 <u>.</u>	-		, , ,
f	Total of lines 3a through e	689,511		٠.	
4	Qualifying distributions for 2016 from Part XII,			,	
•	line 4 ▶ \$		* 5 * *)-	
а	Applied to 2015, but not more than line 2a		7,0	,	3.7 1 1" 1" 1" 1" 1" 1" 1" 1" 1" 1" 1" 1" 1
b	Applied to undistributed income of prior years	17, 17 1,	<u> </u>		e ()
	(Election required—see instructions)			e s es es se.	
_	Treated as distributions out of corpus (Election		7, ,		
·	required—see instructions)		7,		
d	Applied to 2016 distributable amount	7, 75, 75	<u> </u>	3-4 3-	***
	Remaining amount distributed out of corpus	7.1.		B 2	20 9 S 4 S 2 S 1 1 S 100
е 5	Excess distributions carryover applied to 2016.	161,820			161,820
9	(If an amount appears in column (d), the same	101,020			101,020
	amount must be shown in column (a))	135° 13° 1			
•	Enter the net total of each column as				
6	indicated below:				
_		507.004			
a	Corpus. Add lines 3f, 4c, and 4e Subtract line 5	527,691	118 21428 St		
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b		0	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	3,7
С	Enter the amount of prior years' undistributed	13-4			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	income for which a notice of deficiency has			and the second of	
	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	- <u>, , , , , , , , , , , , , , , , , , ,</u>		· · · · · · · · · · · · · · · · · · ·	
е	Undistributed income for 2015. Subtract line	• *	,		
	4a from line 2a Taxable amount—see	*	-		
	instructions		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0	<u> </u>
f	Undistributed income for 2016. Subtract lines		, , ,		
	4d and 5 from line 1. This amount must be	•	,		
	distributed in 2017		·	<u> </u>	0
7	Amounts treated as distributions out of corpus		'		
	to satisfy requirements imposed by section			• (
	170(b)(1)(F) or 4942(g)(3) (Election may be				'
	required—see instructions)				
8	Excess distributions carryover from 2011 not		•		
	applied on line 5 or line 7 (see instructions)	361,489			
9	Excess distributions carryover to 2017.				
	Subtract lines 7 and 8 from line 6a	166,202			~
10	Analysis of line 9.				
а	Excess from 2012			`	, -
b	Excess from 2013			j	'
С	Excess from 2014			: [
ď	Excess from 2015			,	
е	Excess from 2016				

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

c Any submission deadlines.

factors

Page **11**

Par	XV Supplementary Information (conti	nued)			
3	Grants and Contributions Paid During	the Year or Approve	ed for Fut	ture Payment	
	Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	<u> </u>
a		or substantial contributor	recipient		
	Total			▶ 3a	0
b	Approved for future payment				
	Total			<u></u> > 3t	

	gross amounts unless otherwise indicated.	Unrelated bus	iness income	Excluded by sect	on 512, 513, or 514	
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
	Program service revenue	 		 		
í		 		 		
t		-		 -		
				 		
(· · · · · · · · · · · · · · · · · · ·			<u> </u>		
•						·
ç	Fees and contracts from government agencies					
-	Membership dues and assessments					
	nterest on savings and temporary cash investments .					
	Dividends and interest from securities	 				
	Net rental income or (loss) from real estate		·		·	200
а		\\ \frac{1}{2} \\ \fr		1	 	
b						
	let rental income or (loss) from personal property		- -			
	Other investment income					
	Gain or (loss) from sales of assets other than inventory			1		
		 				
	let income or (loss) from special events			-	<u></u> .	
						
b	Other revenue a					
		-				ļ
c d						
u				 		
12 9	ubtotal. Add columns (b), (d), and (e)	7 7 7		- 19-20 C	0	0
	otal. Add line 12, columns (b), (d), and (e)				13	0
	rorksheet in line 13 instructions to verify calculations					
	XVI-B Relationship of Activities to the A		nt of Exempt	Purposes		
Line N					importantly to the	
•	accomplishment of the foundation's exempt pur	poses (other than b	y providing fund	s for such purpos	es). (See instruct	ons.)
		·				
				 .		
			·		····	
			·-··			
		· 				
						 -
			 			
				 -		
		··········				
						
_						
					 – –	
						
		<u></u>			F	om 990-PF (2016)

Part	.XV		n Regarding Trans ganizations	fers To and Trans	actions and Re	lationship	s With Nonchar	itable		
1	ın s	the organization of the	directly or indirectly engle le Code (other than se	• •	-	_			Yes	No
		itical organizations							j :	
а			porting foundation to a							V
	٠,							1a(1) 1a(2)		X
L		Other assets						18(2)		 ^-
b		er transactions	a noncharitable exem	nt organization				1 b(1)	ł	V
	٠,		ets from a noncharitable	. •				1 b(2)	-	X
			, equipment, or other a					1 b(3)		X
	٠,		rrangements					1 b(4)	-	$\frac{\hat{x}}{x}$
			rantees					1 b(5)		X
			ervices or membership					1 b(6)		X
С			quipment, mailing lists					1c		X
ď			the above is "Yes," com							
	valu	e of the goods, other e in any transaction	er assets, or services giv or sharing arrangemen	ven by the reporting fou t, show in column (d) th	ndation. If the foun e value of the good	dation received dation received data other asse	ed less than fair mark ets, or services receiv	<u>ed.</u>		
(a) Line	no e	(b) Amount involved	(c) Name of nonch	aritable exempt organization	(d) Desc	ription of transfe	ers, transactions, and sha	nng arrar	ngemen	ts
			 							
			· · · · · · · · · · · · · · · ·							
		 	 				 			
			 							
			 							
			 							
	\dashv	 								
										
					 -					
										
										
	$\neg f$			··_ · · · · · · · · · · · · · · · · · ·						
			 							
	_		 							
2a b	des	cribed in section 5	ctly or indirectly affiliate 01(c) of the Code (oth following schedule.					Yes	ΧN	——— lo
		(a) Name of organ		(b) Type of orga	nization		(c) Description of relatio	nship		
					<u>i</u>					
			lare that I have examined this retu on of geparer (other than taxpaye				owledge and belief, it is true,			
Sign Here		Bullak	fire .	11/83/17	PRESIDENT		May the IR with the programmer (see instru	eparer sh <u>o</u>	wn beloy	<u>~</u>
	21	nature of officer or trus		Date Date	Title	Date		OTIM		
Paid		Print/Type preparer	_	Preparer's signature	11/200	1	Check rf	PTIN	· · - ·	
Prepa	rer	LONNIE WOLLI		- true	well	11/6/20		P0128	2474	
Use O		Firm's name	LONNIE E WOLLIN		N1.07450			68041		
		Firm's address	124 PRUSPEUT STE	REET, RIDGEWOOD,	NJ U/45U		Phone no (201)	<u>816-84</u>	<u>U4</u>	

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

Name of the organization		Employer identification number
CBIS FOUNDATION, INC.		20-3362453
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private found	dation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	n
	501(c)(3) taxable private foundation	
•	vered by the General Rule or a Special Rule.	
Note: Only a section 501(c)(7), instructions.	(8), or (10) organization can check boxes for both the General Rule and a	Special Rule, See
General Rule		
	g Form 990, 990-EZ, or 990-PF that received, during the year, contribution operty) from any one contributor. Complete Parts I and II See instructions butions.	
Special Rules		
regulations under section 13, 16a, or 16b, and that	cribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 9 ons 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or it received from any one contributor, during the year, total contributions of amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Contributions of	990-EZ), Part II, line the greater of (1)
contributor, during the y	cribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receiver, total contributions of more than \$1,000 exclusively for religious, charicular contributions of cruelty to children or animals. Complete	table, scientific,
contributor, during the y contributions totaled mo during the year for an ex General Rule applies to	cribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received, contributions exclusively for religious, charitable, etc., purposes, but refer than \$1,000. If this box is checked, enter here the total contributions the exclusively religious, charitable, etc., purpose Don't complete any of the part of this organization because it received nonexclusively religious, charitable during the year	no such part were received parts unless the parts, contributions
Caution: An organization that is	n't covered by the General Rule and/or the Special Rules doesn't file Scho	edule B (Form 990,

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

Name of organization
CBIS FOUNDATION, INC.

Employer identification number 20-3362453

			
Part I	Contributors (See instructions). Use duplicate copi	es of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BUDGE COLLINS 1111 BAYSIDE DR. SUITE 250 CORONA DEL MAR CA 92629 Foreign State or Province Foreign Country	\$ 1,073,350	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroli Oncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country.	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person

Part I, Line 16b (990-PF) - Accounting Fees

	3,760	0	C	0
				Disbursements
J	Revenue and			for Charitable
	Expenses per	Net Investment	Adjusted Net	Purposes
Description	Books	Income	income	(Cash Basis Only)
1 JLONNIE E WOLLIN, PC	3,760			0

Part I, Line 16c (990-PF) - Other Professional Fees

	16,710	16,710	0	0
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes (Cash Basis Only)
1 INVESTMENT MGT FEES - K-1s	16,710	16,710		0

Part I, Line 18 (990-PF) - Taxes

		25	0	0	0
		Revenue and Expenses	Net Investment	Adjusted	Disbursements for Charitable
	Description	per Books	Income	Net Income	Purposes
1	Real estate tax not included in line 20	0			
2	Tax on investment income	0			
3	Income tax	0			
4	Delaware Franchise Tax	25			

Part I, Line 23 (990-PF) - Other Expenses

	340	0	0	0
	Revenue and			Disbursements
	Expenses	Net Investment	Adjusted Net	for Charitable
Description	per Books	Income	Income	Purposes
1 DELAWARE REP FEE	340	0		

Part II, Line 10b (990-PF) - Investments - Corporate Stock

l			000			
			2,236,528	2,159,826	2,267,704	2,573,862
		Num Shares/	Book Value	Book Value	Ē	FMV
	Description	Face Value	Beg. of Year	End of Year	Beg. of Year	End of Year
-	WHITE RIVER		610'09	0	60,019	0
7	EDENBROOK CAPITAL		1,174,906	1,158,223	985,117	1,173,203
က	3 FRONTAURA		1,000,000	1,000,000	1,220,965	1,399,056
4	SANUWAVE HEALTH		1,603	1,603	1,603	1,603