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Form		g	٩N	<b> </b>	Р	F

## **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.

Go to www.irs.gov/Form990PF for instructions and the latest information

OMB No 1545-0052
2017
Onen to Public Inspection

For calendar year 2017 or tax year beginning	v.rs.gov/Form990PF for inst	, and ending	ormation.	Open to Public Inspection
Name of foundation	<del>-</del> -	,	A Employer identificati	on number
THE CYNTHIA L. & WILLIAM	E. SIMON, JR			_
FOUNDATION			13-379955	5
Number and street (or P O box number if mail is not delivered to stre	•	Room/suite	B Telephone number	
310 SOUTH STREET P.O. BOX			973-898-0	290
City or town, state or province, country, and ZIP or foreign			C if exemption application is	s pending, check here
MORRISTOWN, NJ 07962-191	<del></del>			
G Check all that apply: Initial return		ormer public charity	0 1. Foreign organizatio	ons, check here . PL
Address change	Amended return Name change		Foreign organizations in check here and attach	meeting the 85% test,
	exempt private foundation		1	
Section 4947(a)(1) nonexempt charitable trust	Other taxable private foundation	ation	E If private foundation s under section 507(b)(	
	iting method: X Cash	Accrual	1 ' '	. , , , ,
· , _ ,	Other (specify)	Accidai V	F If the foundation is in under section 507(b)(	
	ımn (d) must be on cash bası	S.)	1 1007 3000011 307(0)(	1)(D), GIIGGK IIGIG
Dart I   Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	expenses per books	income	income	for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received	507,744.		N/A	,
2 Check If the foundation is not required to attach Sch B	· · · · · · · · · · · · · · · · · · ·			
Interest on savings and temporary cash investments	6.	6.		Statement 2
4 Dividends and interest from securities	5,916.	5,916.		Statement 3
5a Gross rents				1
b Net rental income or (loss)				
68 Net gain or (loss) from sale of assets not on line 10	5,549.			Statement 1
b Gross sales price for all 312,829.				
b Gross sales price for all 312,829. 7 Capital gain net income (from Part IV, line 2)		174,251.		
8 Net short-term capital gain				
9 Income modifications Gross sales less returns ECEIVED and allowardes		•		
	•			
Less Cost of goods sold	٠ الإ	*	/	
Gross profitor (loss) AY 2 5,2018	3			4
11 Other income 1	25. 519,240.	0.		Statement 4
	319,240.	180,173.		
13 Compensation of office of the pass, at 1  14 Other employee salaries and wages	J	0.	<u>.                                    </u>	0.
15 Pension plans, employee benefits			<u> </u>	
9 16a Legal fees				
16a Legal fees b Accounting fees				
	4,959.	4,959.		0.
\$ 17 Interest				
c Other professional fees Stmt 5  17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses Stmt 6 24 Total operating and administrative expenses. Add lines 13 through 23	-	<del></del>		<del></del>
19 Depreciation and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses Stmt 6	1,704.	904.		0.
24 Total operating and administrative				
expenses. Add lines 13 through 23	6,663.	5,863.		0.
25 Contributions, girts, grants paid	370,987.			370,987.
26 Total expenses and disbursements.				
Add lines 24 and 25	377,650.	5,863.		370,987.
27 Subtract line 26 from line 12:				
8 Excess of revenue over expenses and disbursements	141,590.			1
b Net investment income (if negative, enter -0-)		174,310.		
c Adjusted net income (if negative, enter -0-)			N/A	

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2017)

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<u></u>		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	f year
Р	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	269,449.	410,648.	410,648.
	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			
		disqualified persons      .			
	7	Other notes and loans receivable	_		
		Less: allowance for doubtful accounts			
13	8	Inventories for sale or use			
ssets	9	Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
		Investments - mortgage loans	200 654	200 151	242 522
	ı	Investments - other Stmt 8	208,654.	209,151.	242,523.
	14	Land, buildings, and equipment basis	<del>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</del>		
	_ ـ ا	Less accumulated depreciation			
		Other assets (describe			
	16	Total assets (to be completed by all filers - see the	470 102	610 700	652 171
_	47	instructions. Also, see page 1, item I)	478,103.	619,799.	,
	18	Accounts payable and accrued expenses Grants payable			
	19	Deferred revenue			
Liabilities	l				* *>
Ē		Loans from officers, directors, trustees, and other disqualified persons  Mortgages and other notes payable			· ·
۳		Other liabilities (describe ► Statement 9)	0.	106.	
					4
	23	Total liabilities (add lines 17 through 22)	o. <b>l</b>	106.	
_		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26, and lines 30 and 31.			· ·
98	24	Unrestricted			J
<b>Balances</b>	25	Temporarily restricted			
		Permanently restricted			
Fund		Foundations that do not follow SFAS 117, check here			1
Ę		and complete lines 27 through 31.			
s or	27	Capital stock, trust principal, or current funds	0.	0.	
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	478,103.	619,693.	Statement 7
ž	30	Total net assets or fund balances	478,103.	619,693.	,
_	31	Total liabilities and net assets/fund balances	478,103.	619,799.	
P	art	III Analysis of Changes in Net Assets or Fund B	alances		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)		1	478,103.
2	•	amount from Part I, line 27a		2	141,590.
3	Othe	r increases not included in line 2 (itemize)		3	0.
4	Add	lines 1, 2, and 3		4	619,693.
5	Decr	eases not included in line 2 (itemize)		5	0.
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	619,693.
		···			Form <b>990-PF</b> (2017)

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<del></del>		sses for Tax on In  of property sold (for exar			( <b>b</b> )	How ac	cquired hase	(c) Date a	cqured	(d) Date sold
2-story brick warehouse; or common stock, 200 shs. MLC Co.)					<u> </u>	- Purc - Dona	ation	` (mo., da	ıy, yr.)	(mo., day, yr.)
1a 8,000 SHS DOUG							D '	Vario	ous	05/11/17
ь Capital Gains	Divi	dends			<u> </u>					
d					├					
e				· · · · · · · · · · · · · · · · · · ·						
(e) Gross sales price	(1) (	Depreciation allowed (or allowable)		st or other basis expense of sale					in or (loss (f) minus	
a 305,233.				138,57	8.					166,655 7,596
ь 7,596.										7,596
C				<del></del>						
d	ļ	<del> </del>								
Complete only for assets showing	20.0310.10	column /b\ and owned by	ho foundation	02 12/21/60				0	1 (1)	
Complete only for assets shown					_				ol. (h) gaın ot less tha	
(i) FMV as of 12/31/69	l '	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any				Losses (	from col. (	h))
a	-	······································								166.655
b				·	_					166,655. 7,596.
С										•
d										
е										
2 Capital gain net income or (net ca	apıtal loss)	If gain, also enter If (loss), enter -0-			}	2				174,251
3 Net short-term capital gain or (los	ss) as defi	ned in sections 1222(5) an	d (6):							
If gain, also enter in Part I, line 8,			· /-		Ŋ					
If (loss), enter -0- in Part I, line 8	- do - C		Deduce	[♥ <u> N</u> -4	Д	3			N/A	
		ection 4940(e) for					nent inc	ome		
(For optional use by domestic private	e toundatio	ons subject to the section 4	194U(a) tax on	i net investment in	come	3.)				
If section 4940(d)(2) applies, leave t	his part bl	ank.								
Was the foundation liable for the sec	tion 4942	tax on the distributable am	ount of any ve	ear in the base per	10d?					Yes X No
If "Yes," the foundation doesn't quali										
1 Enter the appropriate amount in	each colur	nn for each year, see the ir	nstructions be	fore making any e	ntries	·-				
(a) Base period years	, ]	(b) Adjusted qualifying dist	tributions	Net value of no	(c)	ritable	uco consto		Distril	(d) oution ratio
Calendar year (or tax year beginni	ng in)			Net value of no	ПСПа				col. (b) dr	nded by col. (c))
2016 2015			4,852. 2,728.				9,914 4,344			.654544 1.472043
2013			$\frac{2,720.}{3,155.}$			<u> </u>	5,315	•		2.58799
2013			$\frac{5,155}{6,650}$				$\frac{3,313}{8,776}$			13.83974
2012		55	6,456.				2,773			10.54433
	-									
2 Total of line 1, column (d)								2		29.09866
3 Average distribution ratio for the			on line 2 by 5.	0, or by the numb	er of :	years				
the foundation has been in existe	nce if less	than 5 years						3		5.81973
4 Enter the net value of noncharitat	ole-use ass	sets for 2017 from Part X, I	line 5					4		602,473
5 Multiply line 4 by line 3					5		3,506,231			
6 Enter 1% of net investment income (1% of Part I, line 27b)				6		1,743				
7 Add lines 5 and 6	,	•						7		3,507,974
8 Enter qualifying distributions from	n Dart VII	line 4						8		370,987
If line 8 is equal to or greater than			1h and some	alata that nast uses	a a 10	0/ <del>to</del>	rato	0		370,307
See the Part VI instructions.	i inic 7, GH	IOON LIIG DUA III FAIT VI, IIIIC	io, and comp	NOTE DIST DELL OSIN	y a l	/0. L4X I	alt.			

•	THE CYNTHIA	L.	&	WILLIAM	E.	SIMON,	JR
Form 990-PF (2017)	FOINDATTON						

Form 99	0-PF (2017)	FOUNDAT				,	• ,	011			3799			Page 4	
•Part	VI Excise	Tax Based o	n Investm	ent Incom	e (Section 49	40(a), 4	494	Ю(b), 49	40(e), or 4	948	see ii	nstru	ction	īs)	
1a Ex	empt operating fo	undations describe	d in section 49	40(d)(2), check	here 🕨 🔛 and	enter "N/	A" on	n line 1.							
Da	te of ruling or deta	ermination letter: _		(attac	h copy of letter if r	ecessary	-see	instruction	s)	1			_		
<b>b</b> Do	mestic foundation	ns that meet the sec	tion 4940(e) re	quirements in F	Part V, check here	ightharpoons	and	enter 1%	}				3,4	86.	
of '	Part I, line 27b				-						_				
c All	other domestic fo	oundations enter 2%	of line 27b. Ex	kempt foreign o	rganizations, enter	4% of Par	rt I, lı	ine 12, coL	(b). J	l					
2 Ta	x under section 5°	11 (domestic sectio	n 4947(a)(1) tr	usts and taxabl	e foundations only;	others, er	nter -	-0-)		2				0.	
3 Ad	d lines 1 and 2									3			3,4	86.	
4 Su	btitle A (income) t	tax (domestic sectio	n 4947(a)(1) t	rusts and taxab	le foundations only	others, e	nter	-0-)		4				0.	
5 Ta	x based on invest	tment income. Sub	tract line 4 from	n line 3. If zero	or less, enter -0-					5			3,4	86.	
6 Cre	edits/Payments;														
a 20	17 estimated tax p	payments and 2016	overpayment of	credited to 2017	<b>7</b> .	6a	<u> </u>		500.						
		nizations - tax with				6b			0.						
c Ta	x paid with applica	ation for extension o	of time to file (F	orm 8868)		6c	L		0.						
d Ba	ckup withholding	erroneously withhe	ld			6d	L		0.						
7 To	tal credits and pay	ments. Add lines 6	a through 6d		_					7				00.	
8 En	ter any <b>penalty</b> fo	r underpayment of	estimated tax. (	Check here 🔙	f Form 2220 is a	tached				8				88.	
9 Ta	x due. If the total	of lines 5 and 8 is n	nore than line 7	, enter amount	owed				<b>&gt;</b>	9			3,0	<u>74.</u>	
10 Ov	erpayment. If line	7 is more than the	total of lines 5	and 8, enter the	amount overpaid				<b>•</b>	10					
		line 10 to be; Credi						[	Refunded 🕨	11					
		ements Rega													
<b>1a</b> Du	ring the tax year, i	did the foundation a	ittempt to influ	ence any nation	al, state, or local le	jis <b>la</b> tion o	r dıd	l it participa	te or intervene	ın			Yes		
any	y political campaig	ìu,										1a		_X	
		an \$100 during the								noin		1b		X	
lf t	he answer is "Yes"	" to 1a or 1b, attac	h a detailed des	scription of the	activities and copie	s of any m	nater	ials publish	ed or			ĺ		1	
dıs	tributed by the foi	undation in connect	ion with the ac	tivities.											
		le Form 1120-POL	•									1c		X	
		any) of tax on politi	cal expenditure						_			ļ			
	On the foundation				foundation manage				<u> </u>			ı			
		ment (if any) paid by	_	n during the yea	ar for political expe	diture tax	ımp	osed on fol	undation			j			
	nagers. 🕨 💲		0.												
		engaged in any activ		not previously b	een reported to the	IRS?						2		X	
		aled description of t													
		made any changes,				g instrum	ent, a	articles of ir	corporation, o	ır					
		ılar ınstruments? İf				_						3		X	
		ave unrelated busin			r more during the y	ear?					,_	4a		X	
		tax return on Form		-		_				N	/A	_4b			
	-	on, termination, dis	-			L,						5		X	
		atement required by													
		s of section 508(e) (		tions 4941 thro	ugh 4945) satisfied	either:									
	, , ,	governing instrum	•												
		that effectively am	ends the gover	ning instrumen	t so that no mandai	ory direct	1005	that conflic	t with the state	law			<b>-</b> -,		
	nain in the govern	_										6	X		
/ Dic	the foundation h	ave at least \$5,000	in assets at any	time during th	e year? If "Yes," coi	nplete Par	rt II, i	col. (c), and	Part XV			7	X		
								37							
8a En	ter the states to w	hich the foundation	reports or with	which it is reg	istered. See instruc	tions.		None							
L 14 4	ho anomar - #\/. *	to line 7 heret 1		abad c == :: f	F 000 PF : ::	A.M						· .			
		to line 7, has the fo				Aπorney	Gen	erai (or des	ignate)						
		ired by General In						\/A\	0/1/F1 : :			8b	Х	<u> </u>	
		iming status as a pr							z(j)(5) for cale	ndar					
		year beginning in 2										9		┝╬╾	_
וט טוכ	any persons dec	ome substantial co	in idutors durir	iy ine tax year?	If "Yes," attach a scho	dule listing	their	names and a	ddresses			10	DE	/2047\	
											rar	m <b>990</b>		(2017)	

Earn	1990-PF (2017) FOUNDATION 13-379	OFFE		Dan- E
	n 990-PF (2017) FOUNDATION 13-379 Part VII-A   Statements Regarding Activities (continued)	<del>, , , , , , , , , , , , , , , , , , , </del>		Page 5
٠٠٠	int vira   Statements Regarding Activities (continued)		V 1	
	Manufacture description to the state of the	$\vdash$	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	1 1		**
	section 512(b)(13)? If "Yes," attach schedule, See instructions	11	-	<u> </u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	1		7,
	If "Yes," attach statement. See instructions	12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A	<del></del>	~~~	
14	The books are in care of ► MASSEY QUICK SIMON & CO., LLC Telephone no. ► 973-8	38-U	290	<del></del> -
	Located at ► 310 SOUTH STREET, MORRISTOWN, NJ ZIP+4 ►0	<u> 1962</u>	-19	13
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	_::	▶	لــا
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	1		
	foreign country			
Pa	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	1 1		
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	] ]		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			'
	(5) Transfer any income or assets to a disqualified person (or make any of either available	1 1		
	for the benefit or use of a disqualified person)?			,
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after	,		
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	16		
	Organizations relying on a current notice regarding disaster assistance, check here		$\neg \neg$	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	1 1		1
·	before the first day of the tax year beginning in 2017?	10		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
_	defined in section 4942(j)(3) or 4942(j)(5)):	1 1		
	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2017?	1 1		
	If "Yes," list the years ▶ , , ,	1 1		
	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect	1 1		
•	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	1 1		
	statement - see instructions.)	2b		
	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.	20		
٠	in the provisions of section 4542(a)(2) are soing applied to any or the years fisted in Za, list the years field.			
2.	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1 1		1
36	during the year?  Let use the following the year?  Yes X No	1 1		
		1 1		
	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2017.)  N/A	3b		₩-
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u> </u>
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 2017?	4b	لييا	X
	F.	orm <b>990</b>	1-PF	(2017)

		5		Page

Part VII-B   Statements Regarding Activities for Which I	Form 4720 May Be F	<b>lequired</b> (continu	ued)				
5a During the year, did the foundation pay or incur any amount to:				Ye	s No		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	s X No				
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	· · · · · · · · · · · · · · · · · · ·		l			
any voter registration drive?			es X No	-	1		
(3) Provide a grant to an individual for travel, study, or other similar purposes?							
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		1	1	}		
4945(d)(4)(A)? See instructions		Y <sub>0</sub>	s X No	Ì	1		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f				1		
the prevention of cruelty to children or animals?		Ye	es X No	}	1		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations		,	-		
section 53.4945 or in a current notice regarding disaster assistance? See instri	uctions .	•	N/A	5b			
Organizations relying on a current notice regarding disaster assistance, check t	nere			- [	1		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		. —		ŀ	İ		
expenditure responsibility for the grant?	N	/A Y	s No	1	1		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			1	ĺ	1		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	_		1	1		
a personal benefit contract?		Ye	s X No				
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		L	6b	X		
If "Yes" to 6b, file Form 8870.			[	l	· .		
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Y <sub>0</sub>	es X No		┷		
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b			
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	/				
Paid Employees, and Contractors  List all officers, directors, trustees, and foundation managers and t	t in a man and the						
List all officers, directors, trustees, and foundation managers and t		(c) Compensation	(d) Contributions to	/o) F	VNANCA		
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	Contributions to employee benefit plans and deferred	accon	xpense nt, other		
WILLIAM E CIMON ID	to position	enter -0-)	compensation	allov	vances		
	TRUSTEE			]			
11100 SANTA MONICA BLVD, STE 1910 LOS ANGELES, CA 90025	0.00	0.	0.		0.		
	PRESIDENT/TRU			<del> </del>			
11100 SANTA MONICA BLVD, STE 1910	LVESIDENI\IVO	DIEE		}			
LOS ANGELES, CA 90025	0.00	0.	0.	1	0.		
DOS ANGELES, CA 90023	0.00	· · · · · ·	<u> </u>	<del></del>	<u> </u>		
	1		l	1			
				1			
<del></del>	<del></del>	ļ		<del> </del>			
		l					
				İ			
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."	L				
	(b) Title, and average	1	(d) Contributions to	(e) E	xpense nt, other		
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	accou	nt, other vances		
NONE	dovoted to position	<u> </u>	compensation	1			
		1		1			
<del></del>	<del> </del>	<del> </del>	<del></del>	<del> </del>			
<del></del>	(	l		I			
<del></del>	<del> </del>	<del> </del>	<del></del>	<del> </del>			
<del></del>		1		1			
<del></del>	<del>  </del>	<del> </del>		1			
<del></del>	1	i		1			
	<del></del>	<u> </u>		+			
<del></del>	1	ļ		{			
Total number of other employees paid over \$50,000	<del></del>	<u> </u>		ــــــــــــــــــــــــــــــــــــــ	0		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly 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	
	1
Total number of others receiving over \$50,000 for professional services	▶ 0
Part IX-A   Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	
De-HV Dia	
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
	Amount
1 <u>N/A</u>	
2	
·	
All other program-related investments. See instructions.	<del></del>
3	
Total. Add lines 1 through 3	0.

13-3799555

Page 8

<u> </u>	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, se	e 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 1	229,698.
ь	Average of monthly cash balances	1b	229,698. 381,950.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	611,648.
е	Reduction claimed for blockage or other factors reported on lines 1a and		<del></del>
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	611,648.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	9,175.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	602,473.
6	Minimum investment return. Enter 5% of line 5	6	30,124.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations, check here  and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	30,124.
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	3,486.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	3,486. 26,638.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	26,638.
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	26,638.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	370,987.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
8	Surtability 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	370,987.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	370,987.
	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.	tualifies for th	ne section

Form **990-PF** (2017)

Form 990-PF (2017)

Part XIII Undietrit	HIA L. & WILLI	AM E. SIMON, JR	
Part XIII Undistributed Income	(see method	JR	
	Tablictions)		13-3799555 P
1 Distributable amount for 2017 from Part XI,	(a)		
line 7 2017 from Part XI,	Corpus	(b) Years prior to 2016	(2)
2 Undistributed -		o phor to 2016	(c) 2016 (d)
a Enter amount for 2016 only  b Total for prior			2017
b Total for prior years:	L T		
3 Excess dian			26,63
a From 2012			0.
bFrom 2013 553, 817.		0.	<del>"</del>
6rrom 2014 - 334.7117	1		
dFrom 2016 40 300	1		
#46.011		1	
10tal of lines 2 234.856		1	1
Qualifying distribute	1-000	1	1
Part XII, line 4: \$ 37.0	1,927,784.		
"Applied to 2010.	7		1
b Applied to undistributed income of prior  years (Election required assets)			
years (Election required - see instructions)  c Treated as distributions out of			
c Treated as distributions out of corpus  (Election required - see materials)			0.
(Election required - see instructions)  d Applied to 2017 distributions		0.	0.
e Remaining amount	0.	<u> </u>	
5 c. — usufbited out c			
must be show appears in column (d) 4	344,349.		
6 Enter the next and (a).)	0.		36
indicated below:			26,638.
a Corpus Add lines 3f, 4c, and 4e Subtract line 5			
b Prior years' undistributed income. Subtract line 5 line 4b from line 2b	,272,133.		0.
line 4b from line 2b	272,133.		1
Enter the amount of prior years'			
Officians		0.	
assessed 4942(a) tax has been pro-	1	·	
and the first than the second	1	1	
amount - see instructions			
e Undistributed in		0.	,
e Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount - see instr.			
Undistributed in See instr		0.	
lines 4d and 5 from to 2017. Subtract			
be distributed in 2018			
7 Amounts treated as distributions out of			0.
corpus to satisfy requirements imposed by  section 170(b)(1)(F) or 4943(c)(c)		1	
may he reason 1972(9)(3) /Fleeting 1			1
Excess distribution	1		0.
not applied - Carryover from 2012	0.		
Excess distribute			
Subtract lines 7 and 8 from line 6a  Subtract lines 7 and 8 from line 6a	,817.		
Analysis of line o			
* EXCESS from on	316.		
Cacess from 2014			
DEXCess from an 446 011	1		+
EXCESS from no.	1	1	
3561 01-03-18 344,349.	1	1	1
	1	1	1
		_ 1	1
			1

THE CYNTHIA L. & WILLIAM E. SIMON, JR

Form 990-PF (2017) **FOUNDATION** 13-3799555 Page 107 Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5) 2 a Enter the lesser of the adjusted net Prior 3 years Tax year (a) 2017 (b) 2016 (c) 2015 (d) 2014 (e) Total income from Part I or the minimum investment return from Part X for 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 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 c "Support" afternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV | Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) See Statement 10 b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. None Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: 🔲 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or email address of the person to whom applications should be addressed: See Statement 11 b The form in which applications should be submitted and information and materials they should include: c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Form **990-PF** (2017)

723601 01-03-18

FOUNDATION

Part XV   Supplementary Informatio				
3 Grants and Contributions Paid During the	Year or Approved for Future F	Payment		
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year	}			
	}			
	\			
SEE STATEMENT 12	}			
	}			370,987
	<del> </del>	<del></del>		
	1			
	1			
	1		1	
	<del></del>		<del> </del>	
	1			
	1			
Total			► 3a	370,987
<b>b</b> Approved for future payment	1		Ì	
			Ì	
None				
None	1		]	
			]	
			]	
<del></del>	<del>                                     </del>	<del></del>		
	[			
	<del></del>	<u> </u>	<b> </b>	
			[	
			[	
	[		[	
	[			
Total			<b>▶</b> 3b	

FOUNDATION

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

	T Unrolated b	Unimona in an ma	<del></del>		
Enter gross amounts unless otherwise indicated.	(a) Business	usiness income (b) Amount	Exclu-	ed by section 512, 513, or 514  (d)  Amount	(e) Related or exempt function income
1 Program service revenue:	code		code	Aniouni	TUTICUUTI ITICUTTE
å	- }				
b	- }				
c	-				
d	-				
e	-				
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments			I - I.		
3 Interest on savings and temporary cash					
investments	-		14	6.	
4 Dividends and interest from securities			14	5,916.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property	<b> </b>		$\vdash$		
6 Net rental income or (loss) from personal	<del> </del>	<del>- · - ·</del>	<del>                                     </del>		
property	1 1		l l	{	
7 Other investment income	<del> +</del>	<del></del>	<del>  -</del>	<del></del>	
8 Gain or (loss) from sales of assets other	<del>    -</del>		<del>                                     </del>		
than inventory			18	5,549.	
9 Net income or (loss) from special events	<del>}</del>		1-4	<del></del>	
10 Gross profit or (loss) from sales of inventory	<del>  -</del>		╁╼╌┼╴	<del></del>	<del></del>
11 Other revenue:	} <del>-</del>	<del></del> -	┝─┼		
	ì		0.1	25	
a MISCELLANEOUS	-		01	25.	
b	-		<del>                                     </del>		<del></del>
c	-		<del>                                     </del>		<del> </del>
d	-	<del> </del>			
e	-				
12 Subtotal. Add columns (b), (d), and (e)	<u> </u>	0.		11,496.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	11,496.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Accom	plishment of Ex	empt	Purposes	
Explain below how each activity for which income the foundation's exempt purposes (other than			contribut	ted importantly to the accomp	lishment of
	<del></del>	<del></del>			
·					
<del></del>					
<del></del>					
<del></del>	<del></del>				
<del></del>					
					<del></del>

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Part XVI	Information Re Exempt Organ		sfers to a	nd Transactions a	nd Relationsh	ips With Nonchari	table	,	<del>-</del>
1 Did the d	organization directly or indi	rectly engage in any	of the followin	ng with any other organization	on described in secti	on 501(c)		Yes	No
				g to political organizations?					
a Transfer	s from the reporting found:	ation to a noncharital	ole exempt or	ganization of:			l		l
(1) Cas	h						1a(1)		X
(2) Oth	er assets						1a(2)		X
<b>b</b> Other tra	insactions:								
(1) Sale	es of assets to a noncharita	ıble exempt organızat	ion				16(1)		X
(2) Pur	chases of assets from a no	ncharitable exempt o	rganization				1b(2)		X
(3) Ren	ital of facilities, equipment,	or other assets					1b(3)		X
(4) Reii	mbursement arrangements	, ., , ,					16(4)		X
(5) Loa	ns or loan guarantees				•		1b(5)		X
(6) Per	formance of services or me	embership or fundrais					16(6)		X
c Sharing	of facilities, equipment, ma	ailing lists, other asse	ts, or paid em	ployees			1c		X
d If the an	swer to any of the above is	"Yes," complete the f	ollowing sche	edule. Column (b) should ah	ways show the fair n	narket value of the goods, of	ther as:	sets,	
	*			ed less than fair market valu	ie in any transaction	or sharing arrangement, sh	ow in		
	(d) the value of the goods,				-T- (4)	<del></del>			
(a)Line no	(b) Amount involved	(c) Name of		e exempt organization	(d) Description	of transfers, transactions, and s	haring ai	rangeme	ents —
		ļ	N/A	<del></del>	<del></del>			_	
		<b></b>			<b></b>				
					ļ.—.—				
	<del></del>								
·——		<del> </del>		<del></del>					
		<del> </del>		<del></del>	<del>-  </del>				
		<del> </del>		<del></del>	<del>- </del>				
	<del></del>	<del> </del>			<del></del>				
	<del></del>				<del></del>				
					<del></del>				
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	<del></del>	<del></del>		·	<del> </del>	<del></del>			
00 10 45 - 6-		Alter affiliate of south and a							
ın sectio	n 501(c) (other than sectio	on 501(c)(3)) or in se	•	or more tax-exempt organi	zations described		Yes	X	No.
U 11 165,	complete the following sch (a) Name of org			(b) Type of organization		(c) Description of relationsh	ID.		
	N/A		<del></del>	(-) i jpo oi oi guinzation		(-)	·r		
		<del></del>			<del></del>				
	<del></del>		<del></del>		<del> </del>				
		<del></del>	<del></del>	<del> </del>	<del>  -</del>	<del></del>			
		<del></del>	<del></del>	· · · · · · · · · · · · · · · · · · ·					
Und	er penalties of perjury, I declare	that I have examined this	s return, includir	ng accompanying schedules and	statements, and to the	best of my knowledge		-	
Here	belief, it is true, correct, and cor	Samol	eparer (other tha	5/14/2018		nas any knowledge retur	n with th	discuss ne prepa v? See in	rer
	Print/Type preparer's na		Preparer's s	innature	Date	Check if PTIN			
	Trine Type proparer 5 lie	u	. repairs 3	August	Jaio	self- employed			
Paid									
Preparer Use Only			L		<del></del>	Firm's EIN		•	
,	Firm's address	<del></del>				<del>                                     </del>			
						Phone no.			

### 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. Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

**Employer identification number** Name of the organization THE CYNTHIA L. & WILLIAM E. SIMON, JR 13-3799555 **FOUNDATION** 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 foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF

Check if your organization is covered by the General Rule or a Special Rule.

501(c)(3) taxable private foundation

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

4947(a)(1) nonexempt charitable trust treated as a private foundation

#### General Rule

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

## Sp

ecial	Rules
	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II.
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-FF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization THE CYNTHIA L. & WILLIAM E. SIMON, JR FOUNDATION

Employer identification number

13-3799555

Part I	Contributors (see instructions) Use duplicate copies of Part I if add	itional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	WILLIAM E. SIMON JR.  11100 SANTA MONICA BLVD, STE 1910  LOS ANGELES, CA 90025	\$\$	Person Payroll Oncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	WILLIAM E. SIMON JR.  11100 SANTA MONICA BLVD, STE 1910  LOS ANGELES, CA 90025	s200,000.	Person X Payroll
(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 Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
723452 11-0		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.) 990, 990-EZ, or 990-PF) (2017)

Name of organization

THE CYNTHIA L. & WILLIAM E. SIMON, JR

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Employer identification number

13-3799555 FOUNDATION Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. Part II: (a) (c) No. (b) (d) FMV (or estimate) Description of noncash property given from Date received (See instructions.) Part I 8,000 SH. DOUGLAS EMMETT INC 1 307,280. 05/10/17 (a) (c) No. FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I (a) (c) No. (d) (b) FMV (or estimate) from Date received Description of noncash property given (See instructions.) Part I (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I (a) (c) No. (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I

Employer identification number

THE CYNTHIA L. & WILLIAM E. SIMON, JR

P	$\smallfrown$	TΠ	רדדו	· A	m	т	ON	ı
r			<b>u</b>	_		•	UDIN	

OUNDA	TION  Exclusively religious charitable, etc., cont	ributions to organizations described	13-379955 Tin section 501(c)(7), (8), or (10) that total more than \$1,000 for
	the year from any one contributor. Complete ( completing Part III, enter the total of exclusively religious	columns (a) through (e) and the follow	WING line entry, For groupstands
	Use duplicate copies of Part III if addition	al space is needed.	<u> </u>
(a) No. from Part I	(b) Purpose of gift (c) Use of gift		(d) Description of how gift is held
-		(e) Transfer of gif	ft
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	ft.
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of git	ft
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gi	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee

Form 990-PF	Gain or (	Loss) fr	om Sale	of Ass	ets	_	Statem	ent 1
(a) Description of Prop	erty				ner ired	Date Acquir	-	te Sold
8,000 SHS DOUGLAS E	MMETT INC			Dona	ted	Variou	ıs 0	5/11/17
(b)	(c)		(d)	_	(e)		(f)	
Gross Sales Pric	Value e Time of		Expense Sale	of	Depre	c. G	Sain or	Loss
305,2	33. 30	7,280.		0.		0.		<2,047.
Capital Gains Divide	ends from Pa	rt IV						7,596.
Total to Form 990-P	F, Part I, 1	ine 6a				_		5,549.
Form 990-PF Interes	st on Saving	s and Te	mporary	Cash I	nvestr	ments	Stateme	ent 2
Source		Rev	a) enue Books		(b) nvestr ncome	ment	(c Adju Net I	sted
BANK OF AMERICA, N. BANK OF AMERICA, D. BANK O			2. 4.			2. 4.		
Total to Part I, li	ne 3		6.			6.		
Form 990-PF	Dividends	and Inte	rest fro	om Secu	rities	s	Stateme	ent 3
Source	Gross Amount	Capita Gains Dividen	Re	(a) evenue r Books		(b) Invest t Incom	- Ad	(c) justed Income
BANK OF AMERICA, N.A.	13,512.	7,5	96.	5,916		5,916	 5.	
<del>-</del>	<del></del>							

Form 990-PF	Other I	ncome		Statement	4
Description		(a) Revenue Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Incom	
MISCELLANEOUS		25.	0	•	
Total to Form 990-PF, Part I,	line 11	25.	0		
Form 990-PF C	ther Profes	sional Fees		Statement	5
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Incom		
INVESTMENT ADVISORY FEES	4,959.	4,959	•		0.
To Form 990-PF, Pg 1, ln 16c	4,959.	4,959	•		0.
Form 990-PF	Other E	xpenses		Statement	6
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Incom		
BANK SERVICE CHARGES MISCELLANEOUS	904. 800.	904			0.
To Form 990-PF, Pg 1, ln 23	1,704.	904			0.
Form 990-PF	Other F	unds		Statement	7
Description		Beg	(A) ginning of Year	(B) End of Year	
Description					
Endowment Fund			478,103.	619,69	13.

Form 990-PF	Other Investments		Statement	8
Description	Valuation Method	Book Value	Fair Marke Value	t
VANGUARD 500 - ADMIRAL VANGUARD ST INVT GRADE DIAMOND HILL FDS LARGE CAP FUND	COST COST COST	5,800. 12,791. 190,560.	14,6 12,6 215,2	47.
Total to Form 990-PF, Part II,	line 13	209,151.	242,5	23.
Form 990-PF	Other Liabilities		Statement	9
Description		BOY Amount	EOY Amount	•
DUE TO WES FOUNDATION		0.	1	06.
Total to Form 990-PF, Part II,	line 22	0.	1	.06.
•	rt XV - Line 1a Foundation Manage	rs	Statement	10

# Name of Manager

WILLIAM E. SIMON, JR. CYNTHIA L. SIMON

Form 990-PF

Grant Application Submission Information Part XV, Lines 2a through 2d

Statement 11

Name and Address of Person to Whom Applications Should be Submitted

WILLIAM E. SIMON, JR. C/O MASSEY QUICK SIMON 11100 SANTA MONICA BLVD, STE 1910 LOS ANGELES, CA 90025

Form and Content of Applications

THE APPLICATION SHOULD BE IN FORM OF A LETTER WITH A COPY OF THE IRS DETERMINATION LETTER AND AUDITED FINANCIAL STATEMENTS, IF AVAILABLE

Any Submission Deadlines

NONE

Restrictions and Limitations on Awards

NONE