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2017

OMB No 1545-0052

Form 990-PF 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	cale	ndar year 2017, or tax year beginning 01-01-20	017 , aı	nd ending 12-31-	-2017		
		undation id Mary Frome Family Foundation	A Employer id	A Employer identification number			
	aitei aii	id Mary Frome Family Foundation	20-0396894				
		d street (or P O box number if mail is not delivered to street address) nus Drive	B Telephone nu	B Telephone number (see instructions)			
			(714) 641-1130)			
		n, state or province, country, and ZIP or foreign postal code , CA 92626	C If exemption	application is pending	g, check here		
G (1	neck al	II that apply ☐ Initial return ☐ Initial return of a	former public charity	D 1. Foreign or	ganizations, check he	re \Box	
• •	icel a	☐ Final return ☐ Amended return	Torritor public charicy	_	rganizations meeting	▶ ⊔	
		Address change Name change			k here and attach co		
H (-	neck ty	/pe of organization Section 501(c)(3) exempt private	foundation		undation status was t		
_		n 4947(a)(1) nonexempt charitable trust Other taxabl		under section	on 507(b)(1)(A), chec	k nere	
		I	☑ Cash ☐ Accru	al F If the found	ation is in a 60-month	termination \Box	
		from Part II, col (c), ▶\$ 6,147,266 □ Other (specify) (Part I, column (d) must			n 507(b)(1)(B), chec		
Pa	rt I	Analysis of Revenue and Expenses (The total				(d) Disbursements	
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)	
	1	Contributions, gifts, grants, etc , received (attach	150,000			(223) Subia only)	
	2	schedule) Check If the foundation is not required to attach					
	-	Sch B					
	3	Interest on savings and temporary cash investments	6	6	6		
	4	Dividends and interest from securities	1,536	1,536	1,536		
	5a	Gross rents					
a)	Ь	Net rental income or (loss)					
Ę	6a	Net gain or (loss) from sale of assets not on line 10	51,687				
Reverne	Ь	Gross sales price for all assets on line 6a 424,950)				
ă	7	Capital gain net income (from Part IV, line 2)		51,687			
	8	Net short-term capital gain					
	9	Income modifications					
	10a b	Gross sales less returns and allowances Less Cost of goods sold	<u>]</u>				
	, c	Gross profit or (loss) (attach schedule)	<u>, </u>				
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	203,229	53,229	1,542		
	13	Compensation of officers, directors, trustees, etc	,	,	,		
	14	Other employee salaries and wages					
Ņ	15	Pension plans, employee benefits					
15e	16a	Legal fees (attach schedule)					
Expenses	ь	Accounting fees (attach schedule)	3,100				
Ě	c	Other professional fees (attach schedule)	12,770				
and Administrative	17	Interest					
tra	18	Taxes (attach schedule) (see instructions)	10				
III S	19	Depreciation (attach schedule) and depletion					
Ē	20	Occupancy					
Ā	21	Travel, conferences, and meetings					
anc	22	Printing and publications					
	23	Other expenses (attach schedule)	9 25				
Operating	24	Total operating and administrative expenses.					
bec		Add lines 13 through 23	15,905	0		0	
0	25	Contributions, gifts, grants paid	306,750			306,750	
	26	Total expenses and disbursements. Add lines 24 and 25	322,655	0		306,750	
	27	Subtract line 26 from line 12	,,,,,,			,	
	a	Excess of revenue over expenses and	-119,426				
	ь	disbursements Net investment income (if negative, enter -0-)		53,229			
	c	Adjusted net income(If negative, enter -0-)		33,223	1,542		
For		work Reduction Act Notice, see instructions.	1	Cat No 11289	<u>'</u>	<u> </u> m 990-PF (2017)	

	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 (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts ▶			
ا ي	8	Inventories for sale or use			
sets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)	171,933	146,762	146,652
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			

12 5,759,903 13 Investments—other (attach schedule) 3,920,326 3,641,293 14 Land, buildings, and equipment basis Less accumulated depreciation (attach schedule) ▶ 15 Other assets (describe > _ 16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I) 4,148,192 4,028,766 6,147,266 17 Accounts payable and accrued expenses 18 Liabilities 19 Deferred revenue . Loans from officers, directors, trustees, and other disqualified persons 20 Mortgages and other notes payable (attach schedule). 21 22 Other liabilities (describe -_

4,148,192

4,148,192 4,148,192 4,028,766

4.028,766

4,028,766

2

3

4

5

6

4,148,192

-119,426

4,028,766

4,028,766 Form **990-PF** (2017)

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) .

Analysis of Changes in Net Assets or Fund Balances

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

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

23

24

25

26

28

29

30

31

Part III

2

Unrestricted

Temporarily restricted Permanently restricted . .

and complete lines 27 through 31.

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

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) ▶ _

Enter amount from Part I, line 27a

or Fund Balances

Assets 27

Net

Page **3**

•					
List and describe th 2-story brick warel	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)			
1 a 10131 712 Pimco Fds Low	Duration Fd		D—Donation P	2017-01-01	2017-02-07
b 5065 856 Pimco Fds Low I			P	2017-01-01	2017-04-11
c 7610 817 Pimco Fds Low [P	2017-01-01	2017-06-20
d 5 934 Pimco Fds Low Dura			Р	2016-04-29	2017-06-20
e Greycourt Partners Fund	TOTT TO		Р	2016-01-01	2017-05-31
e oreyeoure ruitiners ruita	(f)			+	(h)
(e) Gross sales price	Depreciation allowed (or allowable)	Cost or	(g) Cost or other basis plus expense of sale		or (loss) f) minus (g)
a 99	,975		101,95		-1,975
b 49	,975		50,11	0	-135
c 74	,942		75,11	1	-169
d	58		5		-1
	,000		146,03		53,967
	,	nod by the foundation	·		
Complete only for assets	showing gain in column (h) and ow	<u> </u>			(I) (h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) of col(ı) (յ), ıf any	col (k), but not	t less than -0-) or rom col (h))
a					-1,975
b					-135
С					-169
d					-1
e					53,967
	or (net capital loss)	ons) If (loss), enter -0	Part I, line 7	2	51,687 -2,279
For optional use by domestic pr	nder Section 4940(e) for Re				
	section 4942 tax on the distributal qualify under section 4940(e) Do		in the base period	r Ct	∕es ✓ No
1 Enter the appropriate amo	ount in each column for each year,	see instructions before	making any entri	es	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	(d) Distribution rai (col (b) divided by	
2016	296,269		5,404,990		0 05481
2015	301,489		5,873,234		0 05133
2014	261,250		6,025,908		0 04335
2013	255,552		5,329,124		0 04795
2012	242,052		4,986,653		0 04854
)		2	1	0 245995
	for the 5-year base period—divide				0 243993
number of years the found	for the 5-year base period—divide i lation has been in existence if less charitable-use assets for 2017 fron	than 5 years	3		<u>0 049199</u> 5,727,248
5 Multiply line 4 by line 3			5		281,775
	nt income (1% of Part I, line 27b)				532
				1	282,307
				+	
	ns from Part XII, line 4 ,			ng a 1% tax rate Se	306,750 ee the Part VI
					orm 000-DE (2017)

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?.

,	, , , , , , , , , , , , , , , , , , ,
Down WITT	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees,
Part VIII	and Contractors

4 11 11 66 11 11 11 11 11				
1 List all officers, directors, trustee	es, foundation managers a	nd their compensation	·	Т
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
Stan Frome	President	0	'	
151 Kalmus Drive F-2	0 00	Ĭ		
Costa Mesa, CA 92626				
Mary Frome	CFO, Sec	0		
151 Kalmus Drive F-2	0 00			
Costa Mesa, CA 92626				
2 Compensation of five highest-pa	id employees (other than t	hose included on line 1	l—see instructions). If no	ne, enter "NONE."
(a)	Title, and average		Contributions to	
Name and address of each employee pa more than \$50,000		(c) Compensation	employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
NONE				
	 			
Total number of other employees paid ov	er \$50,000			
3 Five highest-paid independent co				E"
(a) Name and address of each person	•	-	e of service	(c) Compensation
. ,	1 paid more than \$50,000	(b) Typ	e or service	(c) Compensation
NONE		4		
		7		
		=		
		4		
Total number of others receiving over \$50	,000 for professional services			
Part IX-A Summary of Direct (Charitable Activities			
List the foundation's four largest direct charitable		ude relevant statistical inform	nation such as the number of	
organizations and other beneficiaries served, con				Expenses
1				
3				
2				
3				
4				
-				
Part IX-B Summary of Program	n-Related Investments	(see instructions)		
Describe the two largest program-related inve	estments made by the foundation o	luring the tax year on lines 1	and 2	Amount
1				
2				
2				
All other program-related investments	See instructions			
3				
-				
Total. Add lines 1 through 3 .				
Totali Add lines I tillough 5			· · · · · · · · · ·	5 000 BE (2047)

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

Amounts set aside for specific charitable projects that satisfy the

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

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.

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

income Enter 1% of Part I. line 27b (see instructions).

3

4

5

2

3a 3h

4

5

306.750

306,218

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532

b Total for prior years

a From 2012. **b** From 2013. . . . c From 2014. . . d From 2015. . . . e From 2016.

Excess distributions carryover, if any, to 2017

f Total of lines 3a through e. 4 Qualifying distributions for 2017 from Part XII, line 4 🕨 \$ a Applied to 2016, 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).

6 Enter the net total of each column as

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 2012 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2018.

10 Analysis of line 9

a Excess from 2013. . . **b** Excess from 2014. . c Excess from 2015. . . . d Excess from 2016. . . e Excess from 2017. . .

Subtract lines 7 and 8 from line 6a

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 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 e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018

indicated below:

d Applied to 2017 distributable amount. . . . e Remaining amount distributed out of corpus **5** Excess distributions carryover applied to 2017 (If an amount appears in column (d), the

same amount must be shown in column (a))

Part X

285,830

53,620

232,210

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Page 9

	,	
Ш	Undistributed Income (see ins	tructions)

1	Distributable amount for 2017 from Part XI, line 7	
2	Undistributed income, if any, as of the end of 2017	
а	Enter amount for 2016 only	

(a)

Corpus

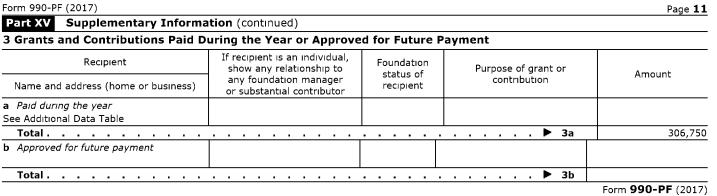
(b)

Years prior to 2016

(c)

2016

253,130



_	amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
_	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
е						
_	nd contracts from government agencies ship dues and assessments.					
Interes	t on savings and temporary cash			14	6	
Dividend	s and interest from securities			14	1,536	
	al income or (loss) from real estate					
	nanced property bt-financed property					
	ital income or (loss) from personal property			+		
	vestment income					
Gain or	(loss) from sales of assets other than					
	mo or (loss) from special events			+		51,687
	me or (loss) from special events rofit or (loss) from sales of inventory			+		
	evenue a					
b						
Subtotal	Add columns (b) (d) and (e)				1,542	51,687
Total. A	dd line 12, columns (b), (d), and (e)			13	·	53,229
	rksheet in line 13 instructions to verify calcule. B Relationship of Activities to th		ment of Exem	ıpt Purposes		
ine No.	Explain below how each activity for which					
▼	the accomplishment of the foundation's ex instructions)	empt purposes (purposes) (See	
▼	the accomplishment of the foundation's ex	empt purposes (purposes) (See	
▼	the accomplishment of the foundation's ex	empt purposes (purposes) (See	
V	the accomplishment of the foundation's ex	empt purposes (purposes) (see	
V	the accomplishment of the foundation's ex	empt purposes (purposes) (See	
V	the accomplishment of the foundation's ex	empt purposes (purposes) (See	
	the accomplishment of the foundation's ex	empt purposes (purposes) (See	
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	the accomplishment of the foundation's ex	empt purposes (purposes) (See	
	the accomplishment of the foundation's ex	empt purposes (purposes) (See	
	the accomplishment of the foundation's ex	empt purposes (purposes) (See	
	the accomplishment of the foundation's ex	empt purposes (purposes) (See	

For	m 990-PF (2017)				Pa	ge 13
l	art XVII	Information Re Exempt Organiz		ions and Relationships With Nonchari	table		
1			idirectly engage in any of the following with a on 501(c)(3) organizations) or in section 527	any other organization described in section 501 , relating to political organizations?		Yes	No
а	Transfers	from the reporting foun	idation to a noncharitable exempt organization	on of			
	(1) Cash				1a(1)		No
	(2) Othe	r assets			1a(2)		No
b	Other tran	isactions					
	(1) Sales	of assets to a nonchari	itable exempt organization		1b(1)		No
	(2) Purch	nases of assets from a n	noncharitable exempt organization		1b(2)		No
	(3) Renta	al of facilities, equipmer	nt, or other assets		1b(3)		No
	(4) Reim	bursement arrangemen	nts		1b(4)		No
					1b(5)		No
	(6) Perfor	mance of services or m	embership or fundraising solicitations		1b(6)		No
	_		nailing lists, other assets, or paid employees		1c		No
a	of the goo	ds, other assets, or ser		folumn (b) should always show the fair market one foundation received less than fair market valuate foundation received he goods, other assets, or services received			
(a)	Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sha	rıng arra	ngemer	its
	I		1				

(- /	-						(-/	-
							1b(5)	No
(6) Per	formance of services or m	embership or fund	raising solicitations				1b(6)	No
c Sharing	of facilities, equipment, r	nailing lists, other	assets, or paid employees.				1c	No
of the g	goods, other assets, or ser	vices given by the	e the following schedule C reporting foundation If th column (d) the value of th	e foundation re	ceived less than fair	market valu		
(a) Line No	(b) Amount involved	(c) Name of nonch	arıtable exempt organization	(d) Descript	ion of transfers, transac	tions, and shar	rıng arrangen	nents
2a Is the fo	oundation directly or indire	ectly affiliated with	, or related to, one or mor	e tax-exempt o	rganizations			
describe	ed in section 501(c) of the	Code (other than	section 501(c)(3)) or in se	ction 527?		[☐Yes [✓ No
b If "Yes,	" complete the following s							
	(a) Name of organization	on	(b) Type of organiza	tion	(c) Descri	iption of relatio	nship	
							·	
of	Inder penalties of perjury, f my knowledge and belief hich preparer has any kno	, it is true, correct	ve examined this return, ir , and complete Declaratio	ncluding accomp n of preparer (d	panying schedules ar other than taxpayer)	nd statement is based on	s, and to the all information	he best tion of
Sign	*****	J	2010 11 15			May th	ne IRS discus	s this

2018-11-15 return with the preparer shown Signature of officer or trustee Date Title (see instr)? Ves 🗆 No Print/Type preparer's name Preparer's Signature PTIN Date Check if self-P00234335 employed \blacktriangleright

Sigi. Here

Thomas G Donovan Firm's name ▶ The Donovan Company Firm's EIN ▶33-0269446 Firm's address ▶ 9930 Research Drive Suite 100 Irvine, CA 92618

Phone no (949) 640-1333 Form **990-PF** (2017)

Paid **Preparer Use Only**

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 Casa Teresa1902 W Chestnut Ave None Public Social Services 11,250 Santa Ana. CA 92703

Mercy HousePO Box 1905 Santa Ana, CA 92705	None	Public	Social Services	5,000
Orangewood Children's Found 1575 E 17th St Santa Ana. CA 92705	None	Public	Social Services	5,000

Total . 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation 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 None Public Social Services 20,000 Special Olympics OC 2080 N Tustin Ave Ste B

Santa Ana, CA 92705				
Human OptionsPO Box 53745 Irvine, CA 92619	None	Public	Social Services	5,000
OC Teen ChallengePO Box 236 Santa Ana. CA 92702	None	Public	Social Services	2,500

Irvine, CA 92619				
OC Teen ChallengePO Box 236 Santa Ana, CA 92702	None	Public	Social Services	2,50
Total				306,750

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 OC Rescue MissionOne Hope Drive None Public Social Services 2,500

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

Tustin, CA 92782				
Hoag Hospital Foundation One Hoag Drive Newport Beach, CA 92658	None	Public	Medical Research	15,000
Miracle For Kids3002 Dow Ave Suite 502	None	Public	Social Services	7,500

Newport Beach, CA 92658				
Miracle For Kids3002 Dow Ave Suite 502 Tustin, CA 92780	None	Public	Social Services	7,500

Miracle For Kids3002 Dow Ave Suite 502 Tustin, CA 92780	None	Public	Social Services	7,500
Tatal	·			306 750

Tustin, CA 92780		1
Total	 	 306,750

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 Royal Family Kid's Camp None Public Social Services 2.000 2000 M/ Ma - Author 412

Santa Ana, CA 92704				
Share Our Selves SOS1550 Superior Ave Costa Mesa, CA 92627	None	Public	Social Services	6,500
Taller San Jose801 North Broadway	None	Public	Social Services	5,000

Costa Mesa, CA 92627				
Taller San Jose801 North Broadway Santa Ana, CA 92701	None	Public	Social Services	5,00
Total				306,750

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation 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 Serving People in Need SPIN None Public Social Services 10,000 6449 Indopendence Ave

Woodland Hills, CA 91367				
Olive Crest2130 East Fourth St Ste 200 Santa Ana, CA 92705	None	Public	Social Services	3,500
Laura's House999 Corporate Dr Ste 225	None	Public	Social Services	3,500

Santa Ana, CA 92705	Hone	Tablic	Social Scivices	3,30
Laura's House999 Corporate Dr Ste 225 Ladera Ranch, CA 92694	None	Public	Social Services	3,50
Total				306,750

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 Kidswork 1902 W. Chestnut Ave. None Public Social Services 20,000 Santa Ana, CA 92703

Alzheimers Association	None	Public	Medical Research	6,000
17771 Cowan Ste 200 Irvine, CA 92614				-,
Save Our Youth SOY661 Hamilton Costa Mesa, CA 92627	None	Public	Social Services	2,500

Irvine, CA 92614				
Save Our Youth SOY661 Hamilton Costa Mesa, CA 92627	None	Public	Social Services	2,500
Total				306.750

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

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

a Paid during the year				
Second Harvest Food Bank 8014 Marine Way Irvine, CA 92618	None	Public	Social Services	2,500
Pediatric Cancer Research Found	None	Public	Medical Research	3,000

ediatric Cancer Research Found 272 Jeronimo Road Ste 107-A vine, CA 92618	None	Public	Medical Research	
later Dei High School	None	Public	Educational	1

Irvine, CA 92618				
Mater Dei High School 1202 W Edinger Ave	None	Public	Educational	15,000
Camba Ama CÃ 03707				

II ville, ert 32010				
Mater Dei High School 1202 W Edinger Ave Santa Ana, CA 92707	None	Public	Educational	15,0

Mater Dei High School	None	Public	Educational	
1202 W Edinger Ave				
Santa Ana, CA 92707				

Mater Dei High School 1202 W Edinger Ave Santa Ana, CA 92707	None	Public	Educational	15,00
Total				306,750

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)

a Paid during the year				
Big Brothers Big Sisters of OC 14131 Yorba Street Suite 200	None	Public	Social Services	

or substantial contributor

3a

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

Tustin, CA 92780				
Boys Hope Girls Hope 1041 W 18th St Suite A 101 Costa Mesa, CA 92627	None	Public	Social Services	2,500

6.000

Boys Hope Girls Hope 1041 W 18th St Suite A 101 Costa Mesa, CA 92627	None	Public	Social Services	2,5
CHOC Foundation455 S Main Street	None	Public	Medical Research	8,0

Costa Mesa, CA 92627				
CHOC Foundation455 S Main Street Orange, CA 92868	None	Public	Medical Research	8,000

00014 1 1004 / 011 12021				
CHOC Foundation455 S Main Street Orange, CA 92868	None	Public	Medical Research	8,00
Total				306,750

Orange, CA 92868	Hone	Tablic	Treateur Neseuren	
Total				

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

3,000

5,000

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

El Viento FoundationPO Box 3897 Huntington Beach, CA 92605	None	Public	Social Services	
a Paid during the year				

Daid during the year

royudanca Speech Hearing	None	Public	Cocial Congress	
83 South Batavia Street Orange, CA 92868	None	T dolla	Social Scrittees	
OC Ronald McDonald House	None	Public	l Social Services	

Orange, CA 92868				
Providence Speech Hearing 1301 Providence Ave	None	Public	Social Services	

rovidence Speech Hearing 301 Providence Ave Drange, CA 92868	None	Public	Social Services	

rovidence Speech Hearing	None	Public	Social Services	
301 Providence Ave Orange, CA 92868				

Providence Speech Hearing 1301 Providence Ave Drange, CA 92868	None	Public	Social Services	15,000
Total				306,750

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

Name and address (home or business)

3a

manne and dadress (nome of pasiness)	or substantial contributor			
a Paid during the year				
Someone Cares Soup Kitchen 720 W 19th Street Costa Mesa, CA 92627	None	Public	Social Services	2,500

recipient

·				
Heart of Jesus Retreat Center PO Box 27722 Santa Ana, CA 92799	None	Public	Social Services	

PO Box 27722 Santa Ana, CA 92799				,
Irrelevant Week3723 Birch Suite 11	None	Public	Social Services	5,00

Santa Ana, CA 92799				
Irrelevant Week3723 Birch Suite 11 Newport Beach, CA 92660	None	Public	Social Services	5,000

Santa Ana, CA 92799				
Irrelevant Week3723 Bırch Suite 11 Newport Beach, CA 92660	None	Public	Social Services	5,0

Irrelevant Week3723 Bırch Suite 11 Newport Beach, CA 92660	None	Public	Social Services	5,000
Total				306,750

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

The Wooden Floor 1810 North Main Street Santa Ana, CA 92706	None	Public	Social Services	5,000
Charles Armstrong School	None	Public	Educational	2,500

Charles Armstrong School 1405 Solana Drive Belmont, CA 94002	None	Public	Educational	2,500
Segerstrom Center for the Arts	None	Public	Social Services	5.000

Belmont, CA 94002				
Segerstrom Center for the Arts 600 Town Center Dr	None	Public	Social Services	5,000
Costa Mosa CA 03636				

Segerstrom Center for the Arts 600 Town Center Dr Costa Mesa, CA 92626	None	Public	Social Services	5,000

600 Town Center Dr Costa Mesa, CA 92626		
Total	 	 306,750

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)

a Paid during the year				
New Directions for Women2607 Willo Ln Costa Mesa, CA 92627	None	Public	Social Services	

or substantial contributor

Total . 3a

Building BlockOne OC	None	Public	Social Services	
.901 E 4th St Suite 100				
Santa Ana, CA 92705				

Disabled Sports - Eastern Sierra	None	Public	Social Services	
1901 E 4th St Suite 100 Santa Ana, CA 92705				
building blockone oc	None	Fublic	Juciai Sei vices	

Santa Ana, CA 32703				
Disabled Sports - Eastern Sierra	None	Public	Social Services	10,000
PO Box 7275 Mammoth Lakes, CA 93546				

2.000

2,000

isabled Sports - Eastern Sierra	None	Public	Social Services	
O Box 7275				
lammoth Lakes, CA 93546				

Disabled Sports - Eastern Sierra	None	Public	Social Services	1
PO Box 7275				
Mammoth Lakes, CA 93546				

Disabled Sports - Eastern Sierra	None	Public	Social Services	10
O Box 7275				
lammoth Lakes, CA 93546				

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)

a Paid during the year				
Mission San Juan Capistrano 26801 Ortega Highway	None	Public	Preservation	

or substantial contributor

3a

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

San Juan Capistrano, CA 92675				
Habitat for Humanity of the OC 2200 S Ritchey St	None	Public	Social Services	

C Vth Chalterit 2011 Barrer Ct	, .	D 11	6 16	3.000
Habitat for Humanity of the OC 2200 S Ritchey St Santa Ana, CA 92705	None	Public	Social Services	4,000

Santa Ana, CA 92705				
Casa Youth Shelter10911 Reagan St Los Alamitos, CA 90720	None	Public	Social Services	3,000

Casa Youth Shelter10911 Reagan St Los Alamitos, CA 90720	None	Public	Social Services	3,000
Janta Ana, CA 92703				

Casa Youth Shelter10911 Reagan St Los Alamitos, CA 90720	None	Public	Social Services	3,00
Total				306,750

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 The Literacy Project None Public Educational 2,500

Corona del Mar, CA 92625				
Goodwill of OC410 N Fairview Santa Ana, CA 92703	None	Public	Social Services	4,500
Casa of OC1615 E 17th St Suite 100	None	Public	Social Services	2,500

Santa Ana, CA 92703	None	Public	Social Services	4,500
Casa of OC1615 E 17th St Suite 100 San Juan Capistrano, CA 92693	None	Public	Social Services	2,500
Total				306,750

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

Ada's Cafe839 Northhampton Dr Palo Alto, CA 94303	None	Public	Social Services	5,000
THINK Together2101-A E 4th St Santa Ana, CA 92705	None	Public	Social Services	2,500
Servite High School	None	Public	Educational	2,500

Santa Ana, CA 92705				
Servite High School 1952 W La Palma Ave Anaheim, CA 92801	None	Public	Educational	2,500

Servite High School 1952 W La Palma Ave	None	Public	Educational	2,50
Anaheim, CA 92801				

1952 W La Palma Ave Anaheim, CA 92801		
Total	 	 306,750

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)

a Paid during the year				
Gold Rush Cure Foundation 27671 Rosebud Way	None	Publicw	Socila Services	3,000

Laguna Niguel, CA 926//				
Sierra Classic TheaterPO Box 543 Mammoth Lakes, CA 93546	None	Public	Arts	2,500

Mammoth Lakes, CA 93546				
The Teen Project 22431 B-160 Antonio Pkwy Ste 527	None	Public	Social Services	

The Teen Project 22431 B-160 Antonio Pkwy Ste 527	None	Public	Social Services	
Rancho Sta Margarita, CA 92688				

or substantial contributor

The Teen Project	None	Public	Social Services	1,000
22431 B-160 Antonio Pkwy Ste 527				
Rancho Sta Margarita, CA 92688				

2431 B-160 Antonio Pkwy Ste 527 ancho Sta Margarita, CA 92688				
he Teen Project	None	Public	Social Services	1,000

ancho Sta Margarita, CA 92688		
Total	 	 306,750

Rancho Sta Margarita, CA 92668		
Total	 	306,750

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

Mammoth Lakes Rep Theatre PO Box 1815 Mammoth Lakes, CA 93546	None	Public	Arts	2,500
International Justice Mission PO Box 96961	None	Public	Social Services	2,500

International Justice Mission PO Box 96961 Washington, DC 20090	None	Public	Social Services	2,50
Assistance League of Santa Ana 1037 First Street	None	Public	Social Services	2,00

Assistance League of Santa Ana None Public Social Services 2,00	Washington, De 20030				
1037 First Street Santa Ana, CA 92703	1037 First Street	None	Public	Social Services	2,000

Assistance League of Santa Ana 1037 First Street Santa Ana, CA 92703	None	Public	Social Services	2,00
Total				306,750

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 Northeast of the Well1109 N Broadway None Public Social Services 2,500

Santa Ana, CA 92701				
Stevenson School3152 Lake Forest Rd Pebble Beach, CA 93953	None	Public	Educational	3,000
Illumination Foundation 2691 Richter Ave Ste 107 Irvine, CA 92606	None	Public	Social Services	10,000

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)

a Paid during the year				
YMCA of Mission Viejo27341 Trabuco Cir Mission Viejo, CA 92692	None	Public	Social Services	2,000
Youth Employment Services	None	Public	Social Services	2,000

Youth Employment Services 114 E 19th Street Costa Mesa, CA 92627	None	Public	Social Services	

or substantial contributor

114 E 19th Street Costa Mesa, CA 92627				
Tilly's Life Center 200 Spectrum Center Dr Ste 300	None	Public	Social Services	

,				
Tilly's Life Center 200 Spectrum Center Dr Ste 300 Irvine, CA 92618	None	Public	Social Services	2,000

Tilly's Life Center 200 Spectrum Center Dr Ste 300 Irvine, CA 92618	None	Public	Social Services	2,00
Total				306,750

Tilly's Life Center 200 Spectrum Center Dr Ste 300 Irvine, CA 92618	None	Public	Social Services	2
	L	l		

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)

3a

a Paid during the year				
Homeaid24 Executive Park Ste 100 Irvine, CA 92614	None	Public	Social Services	2,500
All American Boys Chorus 1801 E Edinger Ave Ste 210 Santa Ana, CA 92705	None	Public	Social Services	2,000

1801 E Edinger Ave Ste 210 Santa Ana, CA 92705	THO ITE	Tublic	Social Scivices	
National Wounded Warrior Center PO Box 7275	None	Public	Social Services	

Santa Ana, CA 92705				
National Wounded Warrior Center PO Box 7275	None	Public	Social Services	

or substantial contributor

Salita Alia, CA 92705				
National Wounded Warrior Center PO Box 7275	None	Public	Social Services	

<u> </u>				
National Wounded Warrior Center PO Box 7275 Mammoth Lakes, CA 93546	None	Public	Social Services	5,000

National Wounded Warrior Center	None	Public	Social Services	5,000
PO Box 7275				
Mammoth Lakes, CA 93546				i
			_	

T-4-1		206.7
Nammoth Lakes, CA 93546		
O BOX 7273		

Mammoth Lakes, CA 93546		
Total	 	306,750

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 continuator			
a Paid during the year				
Project Glimmer269 Stratford Dr	None	Public	Social Services	1,000

306,750

or substantial contributor

an Francisco, CA 94123		
Total	 	

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efile GRAPHIC print - DO NOT PRO	OCESS	As Filed D	ata -		D	LN: 93491319026048	
TY 2017 Accounting Fees Schedule							
	Name:	Walter ar	าd Ma	ry Frome Fam	nily Foundation		
	EIN:	20-03968	394				
Softwa	Software ID: 17005038						
Software Ve	ersion:	2017v2.2	<u> </u>				
Accounting Fees Schedule							
Category	Amo	unt		Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
Tax Preparation		3,100		0	C) 0	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	l: 93491319026048		
TY 2017 Other Expenses Sche	dule			_		
Name:	Walter and Mar	y Frome Family F	oundation			
EIN:	20-0396894					
Software ID:	17005038					
Software Version:	2017v2.2					
Other Expenses Schedule			i			
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
Registration Fee	25					

efile GRAPHIC print - DO NOT PROCES	S As Filed Data	-	DLN	l: 93491319026048		
TY 2017 Other Professional Fees Schedule						
Nam	ne: Walter and N	Mary Frome Family	Foundation			
EI	EIN: 20-0396894					
Software ID: 17005038						
Software Version: 2017v2.2						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
Investment Management Fees	12,770	0	0	0		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	D	LN: 93491319026048			
TY 2017 Taxes Schedule				_			
Name	e: Walter and I	Mary Frome Family	Foundation				
EIM	EIN: 20-0396894						
Software ID: 17005038							
Software Version	n: 2017v2.2						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
California Taxes/Fees	10						