

Form **990-PF** 

EXTENDED TO NOVEMBER 15, 2018

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.

Depa	rtmen	nt of the Treasury		Do not enter		curity numbers or me						<b> </b>	
		venue Service ndar vear 2017 (	ı Or tax year beginni		25.	2017		ending	iest iiiit	DEC 31,	2017	Open to Public Ir	spection
_		f foundation		<u>-</u> -			,			A Employer ide			
		C	OGLU FAMI			)N		,		82-30	00104	<u>_</u>	
			ox number if mail is not		address)				n/suite	B Telephone no			1
			AMINO REA				_	340	)	(650)	799-	4584	
		own, state or pro	ovince, country, and CA 9213		oostal code	)				C If exemption ap	plication is p	ending, check here	►[X] V
G	Check	all that apply:	X Initial re	eturn		Initial return of a	former public	charity	,	<b>D</b> 1. Foreign or	ganizations	s, check here	<b>&gt;</b>
			Final ref			Amended return				2 5		natura the OEO/ toot	
		_	X Address			Name change			-	check here	and attach co	eting the 85% test, imputation	<b>&gt;</b>
H C		type of organiza		ction 501(c)(3) e					YI			tus was terminated	<b>d_</b>
			) nonexempt charita	ĭ		able private four d: X Cash				under section	1 507(b)(1)	(A), check here	
		arket value of all Part II, col. (c), li	assets at end of ye	ı	ing metho Other (spec		ACC	crual		1		60-month termina (B), check here	tion
-	·\$	art 11, con. (c), 11		7 . (Part I, colu			SIS.)			under Section	1307(0)(1)	(D), CHECK HEIE	
		Analysis of R	evenue and Expens	ses	1	Revenue and	(b) Net	nvestm	nent	(c) Adjust	ed net	(d) Disbursen	nents
		→ (The total of amo	ounts in columns (b), (c) if the amounts in colum	, and (d) may not	expe	nses per books	ind	come		incom		for charitable pur (cash basis o	rposes
	1	Contributions,	gifts, grants, etc., re	eceived	1,	250,000	· WENTERS			.∵.N/A		TAMES A.P.	Mil M
	2	•	if the foundation is not requi	red to attach Sch B	2.00		e boektok	NIP!		S. Walker		<b>用数数表达</b> 。	式の製剤
	3	Interest on saving cash investments	s and temporary			67			67.	_		STATEMEN	JT × 1
	4	Dividends and	interest from securi	ities						ļ			
	5a	Gross rents		•	5568888888	anni de la companya	a seconda	384 QV 1850	- 100 200 100 100 100 100 100 100 100 100	- 57% かけ フェンル 登場を	WED-WELV 17.+4	La Alexandria	
	b		· · · <del></del>		392223	MANUTE STATES	2 24/2000 44/3	ANGEN ANGEN	(1) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4		ing and the company of the company o	5766822464617 206827623	5242560
e	68	Gross sales price	from sale of assets not for all	on line 10	1300276		A PARTICIPATION	4 F4 12% 1, 58/89	er e	STATE OF THE STATE		TARABARA	<u>* 94 TANA</u> *S. 74 YEAR
Revenue	7	essets on line 6e	come (from Part IV, line	2)	1000		k sometinen H	5 (GP_38).	0.	TO SERVICE THE SERVICE STREET		A STATE OF S	70.72334
ھُ ل	8	Net short-term		,		2000 C C C C C C C C C C C C C C C C C C		1000	<i>.</i>	STATION OF YALLS	annion, mare,		
	9	Income modific						157.	in the		-	100	7727
	10a	Gross sales less re and allowances	eturns		1400			(S)(A)	地位外	智慧語,陸麗		76 14 W 10	
	Ь	Less Cost of good	ds sold		is and	NEW WILE	T THE STATE OF	LAP OF	<b>MASS</b>	No with	1900 A	\$12.50 m	
	c	Gross profit or	(loss)										THE STATE OF
	11	Other income			<u> </u>								745
	12	Total. Add line			1,	<u>250,067</u>			67.	,			
	13		officers, directors, trust			0	•		0.				0.
	14 15		e salaries and wage employee benefits	S	-						-		
ø		Legal fees	employee beliefits				+	$\neg \vdash$	D	ECEIVE	· D		
nse	iva h	Accounting feet	s					$\dashv$		POPINE			
Expens	c	Other professio					·· <del> </del>	ष्ट	1	0 0 00	117		
	4-	Interest						B105	M	0 <b>2 0 20</b>	18   j		
strative	18	Taxes									ír. l		
ist	19	Depreciation an	nd depletion						<u>O(</u>	BDEN L	JŢ	Tanakan i	Mark Comment
<u>E</u>	20	Occupancy					ļ						
PΑ	21		nces, and meetings		ļ								
g and	22	Printing and pu					-			<u> </u>	<u>.</u>	<b>_</b>	
		Other expenses			<u> </u>		<del> </del>			<del> </del>			
Operatir	24		g <b>and administrativ</b> I lines 13 through 2			0			0.				0.
ŏ	25	•	gifts, grants paid	U	1.0	000,000		Takana	A Section	<i>设</i> 於了影響的		1,000,	000-
			gints, grants paid and disbursement	ts.	<u> </u>		Southern Louis Co. Dept. P. Co. University	rendami importi	KROPELSTAL ST	A TOUR OF THE MARKINGS	According a neigh A to P.	,,	
	-	Add lines 24 an			1,0	000,000	, [		0.			1,000,	000.
	27				A CONTRACTOR							VIII THE REST OF	
	a	Excess of revenue	over expenses and dis	bursements		250,067		N. A. 12		法公共經濟	KER SHIP	WARE S	
	b	Net investment	tincome (if negative,	enter -0-)			t.	7.20 PM A T T	67.	Mary 4.53.20	理論經	State State State	£\$9\$3
	C	Adjusted net in	ICOME (if negative, en	ter -0-)	25.0		<b>阿尔拉拉斯</b>			N/A		675.2 S	<b>EXAM</b>

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

Form 990-PF (2017) THE HALICIOGLU FAMILY FOUNDATION 82-3000104 Part II Balance Sheets Attached schedules and amounts in the description Beginning of year End of year (b) Book Value (c) Fair Market Value (a) Book Value 1 Cash - non-interest-bearing 250,067. 250,067. 2 Savings and temporary cash investments 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 8 Inventories for sale or use 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 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment basis Less accumulated depreciation 15 Other assets (describe ► 16 Total assets (to be completed by all filers - see the 250,067 250,067 instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 23 Total liabilities (add lines 17 through 22)  $\triangleright [X]$ Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31. 250,067 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds Net Assets 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 250,067 0. 30 Total net assets or fund balances 0. 250,067 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3

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250,067.

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5 Decreases not included in line 2 (itemize)

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

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

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8 Enter qualifying distributions from Part XII, line 4

7 Add lines 5 and 6

	990-PF (2017) THE HALICIOGLU FAMILY FOUNDATION  THE HALICIOCUPAL FAMILY FOUNDATION  THE HALICIOCUP		940(k	o), 4940(e),	or 49		3000 see in		Page	4
1a b	Exempt operating foundations described in section 4940(d)(2), check here  Date of ruling or determination letter:  (attach copy of letter if neconsection described in section 4940(e) requirements in Part V, check here  of Part I, line 27b  All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4%	nter "N// essary-	A" on lir see ins and en	ne 1. structions) ter 1%	}	1			1	<u>.</u>
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; oth					2	20.00.00		0	•
3	Add lines 1 and 2					3			1	<u>-</u>
4	Subtitle $\Lambda$ (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; otherwise, and taxable foundations on the foundation of the foundations of taxable foundations of taxable for the foundation of taxable foundations of taxable for the foundation of taxable for	hers, er	it€i -0	) -		4			0	_
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-					5	y) v, 4,00	Novemble Committee	1	<u>•</u>
6	Credits/Payments:	ı	1		_					
	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	<u> </u>		0.		( )			H
	Exempt foreign organizations - tax withheld at source	6b			0.					1
	Tax paid with application for extension of time to file (Form 8868)	6c			0.					9
	Backup withholding erroneously withheld	_6d	i		٠.	7	2-4 1		0	<i>2</i> 1
	Total credits and payments. Add lines 6a through 6d  Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attack.	had				8			0	_
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	1160				9			$\frac{3}{1}$	_
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid					10				<u> </u>
	Enter the amount of line 10 to be: Credited to 2018 estimated tax			Refund	ed 🕨	11				_
	TAVILEAN Statements Regarding Activities									_
1a	During the tax year, did the foundation attempt to influence any national, state, or local legisla	ation or	did it j	participate or in	tervene	ın		经数 Ye	es No	<u>&gt;</u>
	any political campaign?							1a	X	_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos	es? Se	the in	structions for t	ne defin	ition		1b	X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of	f any m	aterials	published or						<b>3</b>
	distributed by the foundation in connection with the activities.									2
	Did the foundation file Form 1120-POL for this year?							1c	X 2004	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the				^					
	(1) On the foundation. > \$ (2) On foundation managers.				0.	•				Ž.
е	Enter the reimbursement (if any) paid by the foundation during the year for political expendit managers. > \$	ure tax	ımpose	ed on foundatio	П					
2	Has the foundation engaged in any activities that have not previously been reported to the IR	62						2	X	7.7
-	If "Yes," attach a detailed description of the activities.	J.								
3	Has the foundation made any changes, not previously reported to the IRS, in its governing in	strume	nt. artıc	cles of incorpor	ation, o	r				3
•	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		•		•			3	X	aid.
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year'	7						4a	X	_
b	If "Yes," has it filed a tax return on Form 990-T for this year?					N	/A	4b		_
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								7. T.	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eith	her:								
	By language in the governing instrument, or		ı							
	By state legislation that effectively amends the governing instrument so that no mandatory	direction	ons tha	t conflict with t	he state	law				<b>8</b>
_	remain in the governing instrument?							6 3		_
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," compli-	ete Pan	i II, col.	. (c), and Part X	V			7 X		<b>₹</b>
8a	Enter the states to which the foundation reports or with which it is registered. See instruction <b>CA</b>	ns. 🕨					<del>_</del>	יישטעער וויידער		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Att	torney (	General	(or designate)				183	ئنات	4
	of each state as required by General Instruction G2 If "No," attach explanation							8b X		_()
9	Is the foundation claiming status as a private operating foundation within the meaning of sec	tion 49	42(j)(3	) or 4942(j)(5)	for cale	ndar				
	year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," comp							9	<u> </u>	
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule	a listing t	her nam	es and addresses	- 5	TMT		10 X		<del>_</del>

	1 990-PF (2017) THE HALICIOGLU FAMILY FOUNDATION 82-300	0104		Page !
P	art VII-A Statements Regarding Activities (continued)			
		200	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule See instructions	11_	ļ	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	<u> </u>	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	700 4	<u> </u>	
14	The books are in care of ► THE FOUNDATION Telephone no. ► 650 - 1	<u>/99-4</u>	584	
	Located at ► 11512 EL CAMINO REAL, SAN DIEGO, CA ZIP+4 ►	<u> </u>		_
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	31	. / 3	ـــا •
	and enter the amount of tax-exempt interest received or accrued during the year	N	I/A	No
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	+
	securities, or other financial account in a foreign country?	16	<u> </u> 	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
(P)	foreign country  int VII: B Statements Regarding Activities for Which Form 4720 May Be Required		<u>,, 31. 34</u>	3,352
· .		1,2,7 6	Yes	No
1.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  During the year, did the foundation (either directly or indirectly):	837.33r	V. 715	2 1435
16	(1) Engago in the sale or exchange, or leasing of property with a disqualified person?  Yes X Nu			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		300	
•	a disqualified person?		25.77	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	(0)		
	(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		1,50 %	
	for the benefit or use of a disqualified person)?		1000000	
	(6) Agree to pay money or property to a government official? (Exception Check "No"			4.3
	if the foundation agreed to make a grant to or to employ the official for a period after		18.00 pt	2.0
	termination of government service, if terminating within 90 days.)		1	
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	Manhania 1	had tilliam	
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b		
	Organizations rolying on a current notice regarding disaster assistance, check here	) (SEON)	2572.2.27. mindenning 26.522.84	
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	
	before the first day of the tax year beginning in 2017?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			1,000 PM
	defined in section 4942(j)(3) or 4942(j)(5)):		4 2 1 3	
a	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6c, Part XIII) for tax year(s) beginning	in the second	語が おけ 巻をなけ	
	before 2017?		经条	
	If "Yes," list the years $\blacktriangleright$			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (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	\$2.00 pt	2. 1941/m	92
	statement - see instructions ) N/A	2b		D-765" 1751
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		omition of	
	<b>&gt;</b>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after		3	130 m
	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	Fig. 25	291	
	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,	La Carre	_ (40)0	.466
_	Form 4720, to determine if the foundation had excess business holdings in 2017)  N/A	3b	<b></b>	v
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	38'3.0'¥	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		394X	X
_	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b Form <b>99</b> 0	)-PF	
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Form 990-PF (2017) THE HALICIOGLU FAMILY FOR			82-30001	L04		Page 6
Part VIEB Statements Regarding Activities for Which F	orm 4720 May Be R	equired (contin	ued)			
5a During the year, did the foundation pay or incur any amount to			Ŀ	200	Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Y	es 🗶 No		<b>5</b> 7	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ectly,				
any voter registration drive?			es X No			96
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es 🗶 No 🏻		142 T	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			Ġá(		
4945(d)(4)(A)? See instructions		Y	es 🗶 No 📙			
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f					
the prevention of cruelty to children or animals?			es 🗓 No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	•	ın Regulations				
section 53.4945 or in a current notice regarding disaster assistance? See instru			N/A	5b		6655-7753
Organizations relying on a current notice regarding disaster assistance, check h				3.00	4 3 K	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr				( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )		
expenditure responsibility for the grant?	r	1/A	es 🔲 No			
If "Yes," attach the statement required by Regulations section 53.4945-5(d).						
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on		es 🗓 No			
a personal benefit contract?	arangel hangest apatract?	L 7·	es A NO	Gb I	1 24 182	X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p If "Yes" to 6b, file Form 8870.	crsonal Denemi Contract?		l l	-00 -₹15.5 3	1.36	######################################
7a At any timo during the tax year, was the foundation a party to a prohibited tax s	helter transaction?		es X Nu	initia in in in		
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	J	24M2<- 1
Part VIII Information About Officers, Directors, Truster Paid Employees, and Contractors		nagers, Highly	1		I	
1 List all officers, directors, trustees, and foundation managers and the	neir compensation.					
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(4	e) Expo	ense
(a) Name and address	hòurs per week devoted to position	(If not paid, enter -0-)	and deferred compensation	acc	count, allowar	other
NOAH NEDIM HALICIOGLU	DIRECTOR					
11512 EL CAMINO REAL SUITE #340				İ		
SAN DIEGO, CA 92130	1.00	0.	0.			0.
JAMES KELLY	TREASURER					
11512 EL CAMINO REAL SUITE #340						
SAN DIEGO, CA 92130	1.00	0.	0.	4		0.
		<b>.</b>	ļ	-		
				1		
2 Compensation of five highest-paid employees (other than those incl	luded on line 1) If none	enter "NONE "				
2 Compensation of the highest-paid employees (other than those incl	(b) Title, and average	I NONE.	(d) Contributions to	16	e) Expe	ense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	acc	count, illowar	other
NONE .	devoted to position		compensation	+ "	mowai	1003
			·	<del>                                     </del>		
				1		
		1		ĺ		
		ĺ		T		
		<u> </u>	L	L		
		<u> </u>		<u> </u>		
Total number of other employees paid over \$50,000			<b>•</b>			0

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Part VIII	Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highe	st-paid independent contractors for professional services. If none, enter "NOI	NE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
N	ONE		
<del></del>			
Total number of	of others receiving over \$50,000 for professional services		▶ 0
Part IX-A			
List the founda	tion's four largest direct charitable activities during the tax year. Include relevant statistical in	formation such as the	Expenses
	anizations and other beneficiaries served, conferences convened, research papers produced, o	etc.	
1N	/A		
2			
з			
		<del>,</del>	
4			
5 . 10/ 5			<u></u>
	Summary of Program-Related Investments	10	
	to largest program-related investments made by the foundation during the tax year on lines 1	and 2.	Amount
1N	/A		
2			
-			
All other progr	am-related investments. See instructions.		
3			
Tatal Add ha	es 1 through 3		0.

Form **990-PF** (2017)

F	Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	, see instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
b		1b	31,258.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	31,258.
	Reduction claimed for blockage or other factors reported on lines 1a and	aut j	
	1c (attach detailed explanation) 1e 0.	l	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	31,258.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	469.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	30,789.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	932.
F	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations, check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	932.
2a	Tax on investment income for 2017 from Part VI, line 5		
Ь	Income tax for 2017. (This does not include the tax from Part VI.)	]	
c	Add lines 2a and 2b	2c	1.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	931.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	931.
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	931.
F	Part XII Qualifying Distributions (see instructions)		·
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	i	4 000 000
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	1,000,000.
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:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	1,000,000.
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	1,000,000.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	jualifies fo	or the section

Form **990-PF** (2017)

THE HALICIOGLU FAMILY FOUNDATION

Part XIII	Undistributed	Income	(see instructions)
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	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
Distributable amount for 2017 from Part XI,	<u> </u>	•		021
line 7		·		931.
2 Undistributed income, if any, as of the end of 2017			0.	
a Enter amount for 2016 only				
<b>b</b> Total for prior years:		0.		'
3 Excess distributions carryover, if any, to 2017:		0.		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
a From 2012				
<b>b</b> From 2013	•			
¢ From 2014				
d From 2015				
e From 2016				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2017 from	•			
Part XII, line 4: ► \$ 1,000,000.				!
a Applied to 2016, but not more than line 2a			0.	i
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	<u> </u>			
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount				931.
e Remaining amount distributed out of corpus	999,069.			
5 Excess distributions carryover applied to 2017	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	999,069.			
b Prior years' undistributed income. Subtract	222,002			
line 4b from line 2b		0.		
c Enter the amount of prior years'		7 -		
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				1
amount - see instructions		0.		ŀ
e Undistributed income for 2016. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract		***************************************		
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				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)	0.			
8 Excess distributions carryover from 2012				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	999,069.			
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 999,069.				5 000 DE (0047)

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Part XIV   Private Operating Foundations (see instructions and Part VII-A, question 9)   N / A
foundation, and the ruling is effortive for 2017, enter the date of the ruling 6. Chock box to indicate whother the foundation is a private greater and the ruling of the
b Chock box to indicate whether the foundation is a private operating foundation described in section 1942(i)(5) or 1942(i)(5)  2 a Enter the lesser of the adjusted net innown from Part I are immumous meetiment return from Part X for each year insted  b 85% of line 2a  c Qualifying distributions from Part XII, line 4 for each year insted  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 Sq. b, or or for the alternitive test - enter; (1) Value of all assets  (2) Value of assets qualifying under section 4942(i)(3)(8)(i)  b Endowment alternative test - enter; (1) Value of all assets  (2) Value of assets qualifying under section 4942(i)(3)(8)(i)  b Endowment alternative test - enter; (1) Total support from an exempt active section 4942(i)(5)(6)(i) in (3) Largest amount of support from an exempt organization as provided in an exempt organization and section 4942(i)(5)(6)(i) in (4) Gross investment income (interest, dividends, rants, payments on securities loans (section 512(a)(5), or royalties)  1 Information Regarding Foundation Managers:  a Let any managers of the foundation managers at the foundation man as exempt organization as any time during the year-see instructions.)  NONE  b Let any managers of the foundation who low now 10% or more of the clock of a corporation (or an equally large portion of the ownership of a partnership or
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(1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b Endowment alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed c "Support" alternative test - enter. (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization  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.)  1 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).)  NONE  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
under section 4942(j)(3)(B)(l)  b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed  c "Support" alternative test - enter.  (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)  (2) Support from general public and 5 or more exempt organizations as provided in section 4942(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.)  1 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).)  NONE  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
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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 ewnership of a partnership or
other entity) of which the foundation has a 10% or greater interest.
•
NONE
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:
Check here 🕨 🗓 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:
b The form in which applications chould be submitted and information and materials they should include:
c Any submission deadlines:
A Any restrictions or limitations on awards such as by geographical argae, charitable fields, lyinds of institutions, or other factors:
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

3 Grants and Contributions Paid During the	•	Povmont		
Recipient	If recipient is an individual.			
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<del></del>	or substantial contributor	recipient		
Paid during the year		j		
UC SAN DIEGO FOUNDATION		PC	CHARITABLE	
9500 GILMAN DR				
LA JOLLA, CA 92093		ļ		1,000,000.
Total		· · · · · · · · · · · · · · · · · · ·	► 3a	1,000,000.
b Approved for future payment				
NONE				
				<del></del>
				1
Total			<b>▶</b> 3b	0.
				orm <b>990-PF</b> (2017)

THE HALICIOGLU FAMILY FOUNDATION

Enter gross amounts unless otherwise indicated.		ted business income		ided by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
			$\vdash$		
	_	<u> </u>	†	<u></u>	
			<u>†                                      </u>		<del></del>
d			<u>†                                      </u>		
e		<del> </del>	1		
f		<del>                                     </del>	╅		
g Fees and contracts from government agencies			1	<del></del>	†
2 Membership dues and assessments			1		*:
3 Interest on savings and temporary cash		<del></del>	1		
investments		İ	14	67.	
4 Dividends and interest from securities			<del>                                     </del>		
5 Net rental income or (loss) from real estate:		LY CONTROL NO.	242.X	STREET TO STREET	10 (A) A (A) A (A) A (A) A (A)
a Debt-financed property	W 30974 4(1) 1	A MAR A CONTRACT MARK ARE LAND A MARK.	<u> </u>	) my ( , m, ( , m,  Site have no recent to the fact of the	
b Not debt-financed property		<u> </u>			
6 Net rental income or (loss) from personal		<del> </del>			
property					
7 Other investment income			1		
8 Gain or (loss) from sales of assets other		<del> </del>	<del>                                     </del>		
than inventory				1	
9 Net income or (loss) from special events			1		
Gross profit or (loss) from sales of inventory	-	<u> </u>	<del>                                     </del>		
1 Other revenue:					
a b		<u> </u>	<del> </del>		
c					
d	1				
e					
2 Subtotal. Add columns (b), (d), and (e)	\$77. K. V.	0.	***	67.	0.
13 Total. Add line 12, columns (b), (d), and (e)	W		34.	13	67.
(See worksheet in line 13 instructions to verify calculation	ns.)				
Part XVI B Relationship of Activition		omnlishment of Ex	emnt	Purnoses	
Telegonal Median					
Line No. Explain below how each activity for which			contrit	outed importantly to the accor	nplishment of
the foundation's exempt purposes (other	than by providing fu	unds for such purposes).			
					±
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				v	· w
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•					

Form **990-PF** (2017)

723621 01-03-18

Form 990-PF		ALICIOGLU						3000104	Pa	ige 13
Part XVI	Information Re Exempt Organ		sters to a	nd Ira	nsactions a	nd Relationsh	ips With Non	charitable		
1 Did the	organization directly or indi		of the followin	ig with an	y other organizati	on described in sect	ion 501(c)		Yes	No
(other t	han section 501(c)(3) organ	nizations) or in section	on 527, relating	to politic	cal organizations?					
	rs from the reporting found	ation to a noncharita	ible exempt org	ganization	of:			Counting		10000000
(1) Cas								1a(1)	-	$\frac{x}{x}$
` '	er assets							1a(2)		
	<ul> <li>Other transactions:</li> <li>(1) Sales of assets to a noncharitable exempt organization</li> </ul>							1b(1)		$\overline{\mathbf{x}}$
, ,	(2) Purchases of assets from a noncharitable exempt organization							1b(2)	ļ —	X
` '	ntal of facilities, equipment,	•	v					1b(3)		X
(4) Rei	mbursement arrangements							1b(4)		X
<b>(5)</b> Loa	ins or loan guarantees							1b(5)		X
	formance of services or me	•	•					1b(6)		X
-	of facilities, equipment, ma	-			(1.)	luna da alba da		<u> 1c</u>		X
	iswer to any of the above is ses given by the reporting fo								sets,	
	(d) the value of the goods,			50 1633 tili	an ian market van	Je ili aliy transaction	or sharing arranger	ilicit, show in		
(a) Line no	(b) Amount involved		f noncharitable	exempt	organization	(d) Description	n of transfers, transaction	ins, and sharing arr	angemer	ıts
			N/A							
<del></del>										
-						<del> </del>				
		· - · · · · · · · · · · · · · · · · · ·								
			·							
						<del></del>				
			<del> </del>							
2a Is the fo	undation directly or indirec	ı tlv affiliated with, or	related to, one	or more	tax exempt organ	ızatıons described				
	in 501(c) (other than sectio		•					Yes	X	No
b If "Yes,"	complete the following sch	edule.								
	(a) Name of org	anization		<b>(b)</b> Typ	e of organization		(c) Description of re	elationship		
	N/A									
						ļ				
<del>_</del>										
	··	<del></del>	·							
Und	er penalties of perjury, I declare t	hat I have examined this	return, including	accompan	ying schedules and s	latements, and to the be	st of my knowledge	May the IRS	dinamen t	
Sign   👢	belief, it is true, correct, and corr	plete Declaration of pre	parer (other than	taxpayer) is	based on all informa	ition of which preparer h	as any knowledge	return with the	e prepare	,
Here	wolf	7			11/14/2018	DIRECT	ror	X Yes		] No
Sı	gnature of officer or trustee			Da	ite	Title				
	Print/Type preparer's na	me	Preparer's si	gnature		Date	Check if	PTIN		
Paid	ODEGODY Y	T OWN FIRT	ODECCE.	37 35	T () 1/3 7/7	11/07/10	self- employed	D00001	2 2 7	
Preparei	GREGORY M. Firm's name ► MOS			Y M.	LOMAZZ	11/07/18	Firm's EIN ▶ 9	P00281		
Use Only	1 1 11 11 3 Haille - 110 D	O PINATO L	TIE				FIRM'S EIN P 9	T-0T023	T 0	
	Firm's address ▶ 63	5 CAMPBEL	L TECH	NOLOG	Y PARKW	AY	<del>                                     </del>	<del></del> -		
		MPBELL, C				· 	Phone no. 40	8-558-7	500	
		-						Form <b>99</b> 6		(2017)

## 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

2017

Employer identification number Name of the organization THE HALICIOGLU FAMILY FOUNDATION 82-3000104 Organization type (check one) Section: Filers of: 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. 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 **General Rule** [X] 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 **Special 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 General Rule 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-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

Employer identification number

## THE HALICIOGLU FAMILY FOUNDATION

82-3000104

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DANIEL TANER HALICIOGLU  11512 EL CAMINO REAL  SAN DIEGO, CA 92130	\$ <u>1,250,000</u> .	Person X 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 Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Page 3 Employer identification number Name of organization THE HALICIOGLU FAMILY FOUNDATION 82-3000104 Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed (a) (c) No. (b) (d) 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) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I (a) No. (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I (a) No. (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

723453 11-01-17

Page 4 Employer identification number Name of organization THE HALICIOGLU FAMILY FOUNDATION 82-3000104 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF	INTEREST	ON	SAVINGS	AND TEMPORARY	CASH	INVESTMENTS	STATEMENT 1
SOURCE				(A) REVENUE PER BOOKS	NET	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
MS #568			67.		67.		
TOTAL TO PART	I, LINE	3	_	67.		67.	

FORM 990-PF LIS	T OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT 2
	111111 111 1111111111111111111111111111	

NAME OF CONTRIBUTOR

ADDRESS

DANIEL TANER HALICIOGLU

11512 EL CAMINO REAL SUITE #340 SAN DIEGO, CA 92130