

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www irs gov/Form990PFfor instructions and the latest information.

Open to Public Inspection

		endar year 2017 or tax year beginning		, 2017, and en	ding		, 20	
١	lame o	of foundation				A Employer identification number		
		THA & IRV KAPLAN FOUNDATION	·				3697275	
Ŋ	lumbe	rand street (or P O box number if mail is not delivered	to street address)	Room/s	uite	B Telephone number	er (see instructions)	
	<	The state of the s				:		
	P.0	. BOX 1501, NJ2-130-03-31				60	9-274-6834	
C	ity or	town, state or province, country, and ZIP or foreign pos	al code					
						C If exemption applica pending, check here	tion is	
	PENI	NINGTON, NJ 08534-1501				ponding, once here		
		ck all that apply Initial return	Initial return	of a former public ch	arity	D 1 Foreign organizat	ions check here	
		Final return	Amended ret	urn		2 Foreign organizat		
		Address change	Name change	Э		85% test, check h computation		
н	Che	ck type of organization: X Section 501(c)(3) exempt private for	oundation 🔊	g .	,		
ſ		ection 4947(a)(1) nonexempt charitable trust	Other taxable pri	2 Lt 11	1	E If private foundation	status was terminated	
亡			unting method X Ca		Ü		n a 60-month termination	
	end		her (specify))(1)(B), check here	
		· · ·	olumn (d) must be on ca	sh basis.)			ـــا ٠	
	art I	Analysis of Revenue and Expenses (The			T		(d) Disbursements	
		total of amounts in columns (b), (c), and (d)	(a) Revenue and expenses per	(b) Net investment	(c) Adjusted net	for charitable purposes	
		may not necessarily equal the amounts in column (a) (see instructions))	books	income	1	income	(cash basis only)	
٦	1	Contributions, gifts, grants, etc., received (attach schedule)	14,838,615.					
	2	Check if the foundation is not required to			+-			
	3	attach Sch B			1			
	A	Dividends and interest from securities	653,075.	152,852		·	STMT 1	
	52	Gross rents						
		Net rental income or (loss)						
8		Net gain or (loss) from sale of assets not on line 10	74,808.	 				
2		Gross sales price for all assets on line 6a 245, 193			 			
Revenue	7	Capital gain net income (from Part IV, line 2) .		74,808	3.			
æ	8	Net short-term capital gain						
	9	Income modifications						
		Gross sales less returns and allowances						
	ь	Less Cost of goods sold .						
		Gross profit or (loss) (attach schedule)						
	11	Other income (attach schedule)	4,749.				STMT 2	
	12	Total. Add lines 1 through 11	15,571,247.	227,660) .			
	13	Compensation of officers, directors, trustees, etc						
enses	14	Other employee salaries and wages		NON NOI		NONE		
ä	15	Pension plans, employee benefits		NONNON		NONE		
9	16a	Legal feet at Corporation STMT . 3 Accounting feet attach scheduler STMT . 4	325.	NON		NONE		
e E	ь	Acopunting fees lattach schedule STMT . 4	3,500.	NON NON		<u>N</u> ONE		
and Administrative Ex	C	Other professional fees (attach soft) 1.5.	5,612.	3,368	3.		2,246	
Ŧ	17	Rerest AY]. 4. 2018 O						
Ę.	18	Taxes (attach schedule) (see instantion of . 6 .	1,144	157	7.		<u> </u>	
Ē	19	Depregnation (attach schedule) and depletion.		<u> </u>				
Ad	20	Depregnation totach scheduler and depletion .					<u> </u>	
ğ	21	Travel, conferences, and meetings		NON NON		NONE		
ē	22	Printing and publications		NON	1B	NONE		
ing	23 24 25	Other expenses (attach schedule) STMT. 7.	335.				335	
ati	24	Total operating and administrative expenses.		=	.			
pe		Add lines 13 through 23	10,916.	3,525	<u> </u>	NONE		
Ō		Contributions, gifts, grants paid	1,363,535.				1,363,535	
_	26_	Total expenses and disbursements Add lines 24 and 25	1,374,451.	3,525	- 	NONE	1,369,941	
	27	Subtract line 26 from line 12.					J	
		Excess of revenue over expenses and disbursements	14,196,796.	001 11				
	1	Net investment income (if negative, enter -0-)		224,135	<u> </u>			
_	C	Adjusted net income (if negative, enter -0-)			_			

JSA For Paperwork Reduction Act Notice, see instructions. 7E1410 1.000 GZW502 T92P 05/07/2018 13:05:19

Form 990-PF (2017)

Б	art II	Attached schedules and amounts in the Beginning of year End of y description column should be for end-of-year		d of year		
Щ	art II	- Dalatice Streets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-beari	ng	1,142.	945	
	2	Savings and temporary	t temporary cash investments			. 22,077
	3	Accounts receivable	I I			
		Less allowance for doub	otful accounts			
- 1	4	Pledges receivable ▶_				
		Less allowance for doub	otful accounts >			
	5					
	6		officers, directors, trustees, and other			
		disqualified persons (atta	ach schedule) (see instructions)			
	7	•	eceivable (attach schedule)			
			otful accounts NONE			
S	8		se			
ssets	9		eferred charges			
As	10a	•	government obligations (attach schedule).			
			stock (attach schedule) . STMT .8.	14,398,050.	28,661,630	32,067,080
		·	bonds (attach schedule)	11/350/050.	20,001,030	3270077000
	11	Investments - land, building and equipment basis Less accumulated deprecia (attach schedule)	ıs, >			
	12	Investments - mortgage	loans			
	13		ich schedule)	438,946.	438,946	. 788,339
	14	Land, buildings, and equipment basis	>			
		Less accumulated deprecia				
	15	Other assets (describe	>)			
	16	Total assets (to be	completed by all filers - see the			
		instructions. Also, see p	age 1, item l)	14,856,350.	<u>29,1</u> 23,5 <u>98</u>	32,878,441
	17	Accounts payable and a	ccrued expenses			
	18	Grants payable				
es	19	Deferred revenue				
Liabilities	20	Loans from officers, directo	rs, trustees, and other disqualified persons			
ä	21		otes payable (attach schedule)		·	7
Ë	22		e >)			1
	23	Total liabilities (add line	es 17 through 22)		NON	\$
		Foundations that follow	v SFAS 117, check here			
es			through 26, and lines 30 and 31.			
2	24	Unrestricted				
Balances	25					1
d B	26	• •				1
		Foundations that do no	ot follow SFAS 117, check here]
or Fun	ŀ	and complete lines 27				
	27	Capital stock, trust princ	cipal, or current funds	14,856,350.	29,123,598	
Net Assets	28		r land, bldg, and equipment fund			Ī
55	29		lated income, endowment, or other funds			1
Ā	30	• .	d balances (see instructions)	14,856,350.	29,123,598]
Se	31		net assets/fund balances (see			
_		instructions)		14,856,350.	29,123,598	
P	art II		nges in Net Assets or Fund Balar			·
_			balances at beginning of year - Part I		ust agree with	
			d on prior year's return)		-	14,856,350.
2			line 27a			14,196,796.
			ded in line 2 (itemize) ► SEE STAT		3	75,017.
			· · · · · · · · · · · · · · · · · · ·		4	29,128,163.
5			n line 2 (itemize) ► SEE STAT		5	4,565.
6			alances at end of year (line 4 minus li			29,123,598.
_						5 000 PE (0043)

Capital Gains and Losses for Tax on Investment Income

	(a) List and des 2-story br	(b) How acquired P - Purchase D - Donation		(d) Date sold (mo , day, yr)		
1 a	PUBLICLY TRADED	SECURITIES		D. Bonous		
ь						
<u>c</u>						
d						
<u>е</u>						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) mini	
a	245,193.		170,385.	-		74,808.
b						
С						
d						
e						
		owing gain in column (h) and owned by	y the foundation on 12/31/69.	/N	Gains (Col. (h) ga	in minue
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) - over col. (j), if any		(k), but not less the Losses (from col	han -0-) or
—— а						74,808.
<u>a</u>				 -		, 1,000.
c						
<u>u</u>						
3	If gain, also enter in P		structions. If (loss), enter -0- in $\}$	3		74,808.
Par		Inder Section 4940(e) for Redu		come		
Was		leave this part blank. the section 4942 tax on the distrib 't qualify under section 4940(e). Do	• •	ase perio	od?	Yes X No
1	Enter the appropriate an	nount in each column for each year	r; see the instructions before making	ng any er	itries.	
	(a)	(b)	(c)	J - 7 -	(d)	
Cale	Base period years endar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution ra (col (b) divided by	
	2016	340,539.	7,702,363.		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	0.044212
	2015	50,100.	928,233.			0.053974
	2014	43,700.				0.045445
	2013	36,600.	871,015.			0.042020
	2012	31,000.				0.041563
2		(d)		2		0.227214
3	Average distribution rati	no for the 5-year base period - divid	le the total on line 2 by 5.0, or by	3		0.045443
4	·		·	4	30	186,481.
4		onchantable-use assets for 2017 fr				
5				5	1,	371,764.
6	Enter 1% of net investm	ent income (1% of Part I, line 27b)	• • • • • • • • • • • • • • • • • • • •	6	<u></u>	2,241.
7	Add lines 5 and 6			7	1,	374,005.
8		tions from Part XII, line 4 greater than line 7, check the box				369,941. ix rate. See the
JSA						990-PF (2017)

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstru	ctions	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		4,4	83.
	here and enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
	Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			<u>IONE</u>
3	Add lines 1 and 2			83.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			IONE
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		4,4	83.
6	Credits/Payments			
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 987.			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c NONE			
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d			<u> 87.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		3,4	96.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2018 estimated tax ► NONE Refunded ► 11			
Par	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		<u> X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
	instructions for the definition	1b		<u> X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.			
C	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ► \$!
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers 🕨 \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			l
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		<u> X</u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<u> </u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		<u> X</u>
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		v	
_	conflict with the state law remain in the governing instrument?	6	<u> Х</u>	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	^	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.	ļ		ļ
	<u>CA</u>	1		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		X	
_	(or designate) of each state as required by General Instruction G7If "No," attach explanation	8b	_^	 -
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes,"	_		\ _v
	complete Part XIV	9_	 	<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		Х	
	names and addresses	10	^	Щ_

Par	VII-A Statements Regarding Activities (continued)			
		T	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		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement. See instructions	12	X	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► US TRUST FIDUCIARY TAX SERVICES Telephone no. ► (609) 274	-683	4	
• •	Located at ► 1300 MERRILL LYNCH DRIVE, PENNINGTON, NJ ZIP+4 ► 08534		<u> </u>	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	-	$\overline{}$	
	and enter the amount of tax-exempt interest received or accrued during the year			Ш
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	-	ا ــــــــــــــــــــــــــــــــــــ	Î
	the foreign country	Ì		
Par	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.	1	Yes	No
12	During the year, did the foundation (either directly or indirectly)	<u> </u>	1.00	1.10
14	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	1		;
	disqualified person?	,		*
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	,	ì.	37.4
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			7.
	the benefit or use of a disqualified person)?			
		1	7,3	
	(6) Agree to pay money or property to a government official? (Exception, Check "No" if the	7.4	1 "	14
	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.)	Ya	-	
_				171.3
D	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1b		لتنفسا
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	10	*	·~
_	Organizations relying on a current notice regarding disaster assistance, check here	İ	13	, ,
٠		1c	158 x	X
•	were not corrected before the first day of the tax year beginning in 2017?			^
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))			
d	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?			
	<u> </u>			
	If "Yes," list the years \(\bigcup_{\text{out}} \) . \(\text{out} \) Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
U				
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	2b		X
_	all years listed, answer "No" and attach statement - see instructions.)	20	<u> </u>	^
٠		1		
20	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
Ja				
L	at any time during the year?			
О	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	1		
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	34		
	foundation had excess business holdings in 2017.)	3b	 -	v
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	 	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4	├	v
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		X

Par	VII-B	Statements Regarding Activities for	or Which Form 4	720 May Be Requ	uired (continued)					
5a	During the	year, did the foundation pay or incur any amountain	unt to				Yes	No		
	(1) Carry o	on propaganda, or otherwise attempt to influen	ice legislation (section	n 4945(e))?	Yes X No					
	(2) Influen	ice the outcome of any specific public ele-	ction (see section 4	1955), or to carry on	,					
	directh	y or indirectly, any voter registration drive?		. 	. Yes X No					
	(3) Provid	e a grant to an individual for travel, study, or ot	her sımılar purposes?	·	. Yes X No					
	(4) Provide a grant to an organization other than a charitable, etc., organization described in									
	section 4945(d)(4)(A)? See instructions									
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational									
	purposes, or for the prevention of cruelty to children or animals? Yes X No									
Ь	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in									
	Regulation	s section 53.4945 or in a current notice regard	ling disaster assistan	ce? See instructions		5b				
	Organizatio	ons relying on a current notice regarding disast	ter assistance, check	here			i '			
c	If the ans	swer is "Yes" to question 5a(4), does the	foundation claim e	xemption from the ta	ax — —					
	because it	maintained expenditure responsibility for the g	grant?		Yes No					
	If "Yes," att	tach the statement required by Regulations sec	ction 53.4945-5(d).				•			
6a	Did the fo	oundation, during the year, receive any fun	ds, directly or indire	ectly, to pay premiun	L	-				
		nal benefit contract?			. L YesX No	-	1	-		
b	Did the for	undation, during the year, pay premiums, direct	ly or indirectly, on a	personal benefit contra	ct ⁹	6b		<u>X</u>		
		6b, file Form 8870								
7a	•	e during the tax year, was the foundation a par	•	•		1				
b		d the foundation receive any proceeds or have								
Par	VIII	Information About Officers, Director and Contractors	s, Trustees, Fou	noation wanager	s, mignly Pald Emp	noyees,				
1	List all off	icers, directors, trustees, foundation ma								
		(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expension				
	N KAPLAN		PRESIDENT							
1425	MONACO DRI	VE, PACIFIC PALISADES, CA 90272		-0 -	-0-			-0-		
DAVID	KAPLAN		TREASURER							
1425	MONACO DRI	VE, PACIFIC PALISADES, CA 90272		-0 -	-0-			- 0-		
	N KAPLAN		SOLE DIRECTOR							
1425	MONACO DRI	VE, PACIFIC PALISADES, CA 90272		-0-	-0-			-0-		
2	Compensa "NONE."	ition of five highest-paid employees	(other than thos	e included on line	e 1 - see instructio	ns). If n	one,	enter		
(a)	Name and ad	idress of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expension	se accou	unt, es		
NONT				NONE	NONE	N.	ONE			
NON.	<u> </u>			NONE	NONE	N	IONE			
										
							_			
					Ì					
					-					
Total	number o	f other employees paid over \$50,000		<u> </u>		N	ONE			

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emand Contractors (continued)	Page 7
3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "N	IONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	NONE
NONE	NONE
Total number of others receiving over \$50,000 for professional services	▶ NONE
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	r of Expenses
organizations and other beneficiaries served, conferences convened, research papers produced, etc	
1 NONE	—]
	—
2	
3	
4	_
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	_
	_
2	
	_
All other program-related investments. See instructions	
3 NONE	<u> </u>
Total. Add lines 1 through 3	>

Fall	see instructions.)	gn Touna	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:	İ	
а	Average monthly fair market value of securities	1a	30,597,811.
b	Average of monthly cash balances	1b	48,363.
C	Fair market value of all other assets (see instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	30,646,174.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	30,646,174.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	459,693.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	30,186,481.
6	Minimum investment return. Enter 5% of line 5	6	1,509,324.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found and certain foreign organizations, check here ▶ and do not complete this part.)	dations	-
1	Minimum investment return from Part X, line 6 · · · · · · · · · · · · · · · · · ·	1	1,509,324.
2a	Tax on investment income for 2017 from Part VI, line 5 2a 4,483.		
b	Income tax for 2017. (This does not include the tax from Part VI.) 2b		
	Add lines 2a and 2b	2c	4,483.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,504,841.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	1,504,841.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	1,504,841.
Par	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	1,369,941.
ь	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1,369,941.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	 	±130313±±.
-	Enter 1% of Part I, line 27b. See instructions	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,369,941.
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		
	qualifies for the section 4940(e) reduction of tax in those years		

Form **990-PF** (2017)

Page 9

Pai	t XIII Undistributed Income (see instri	uctions)			·
		(a)	(b)	(c)	(d)
1	Distributable amount for 2017 from Part XI,	Corpus	Years prior to 2016	2016	2017
	line 7				1,504,841.
2	Undistributed income, if any, as of the end of 2017				
а	Enter amount for 2016 only			83,160.	
b	Total for prior years: 20,20,20		NONE		
	Excess distributions carryover, if any, to 2017			ı	
а	From 2012 NONE				
b	From 2013				
C	From 2014 NONE				
d	From 2015 NONE	•			
	From 2016 NONE	MONT			
	Total of lines 3a through e	NONE			
4	Qualifying distributions for 2017 from Part XII,				
	line 4 ▶ \$ 1,369,941.		•	02 160	
	Applied to 2016, but not more than line 2a			83,160.	
b	Applied to undistributed income of prior years		NONE		
	(Election required - see instructions)		NONE		
С	Treated as distributions out of corpus (Election	NONE			
4	required - see instructions)	NONB			1,286,781.
	Remaining amount distributed out of corpus	NONE			1,200,701.
	Excess distributions carryover applied to 2017	NONE			NONE
-	(If an amount appears in column (d), the same				
6	amount must be shown in column (a)) Enter the net total of each column as				
Ü	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e Subtract line 5	NONE			
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b		NONE		
C	Enter the amount of prior years' undistributed				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed		NONE		
d	Subtract line 6c from line 6b Taxable		NONE		
	amount - see instructions		NONE		
•	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				218,060.
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)	NONE			
8	Excess distributions carryover from 2012 not				
	applied on line 5 or line 7 (see instructions)	NONE			
9	Excess distributions carryover to 2018.				
	Subtract lines 7 and 8 from line 6a	NONB			
	Analysis of line 9				
	Excess from 2013 NONE				
	Excess from 2014 NONE				
	Excess from 2015 NONE				
	Excess from 2016 NONE				
<u>e</u>	Excess from 2017 NONE			<u> </u>	- 000 PF

Form **990-PF** (2017)

05 2/07275

	YIV Private On	orotina Equadations	less instructions		3091413	NOT	A DDI TOMBI
				and Part VII-A, questi		NOI	APPLICABL
1 a	If the foundation has	\					
	foundation, and the ruling	- 1		•		4049(-)(2)	40.40(1)(5)
D	Check box to indicate v		is a private operating		n section	4942(j)(3) or	4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years	T	—— /	(e) Total
	justed net income from Part	(a) 2017	(b) 2016	(c) 2015	(d) 2014		
	I or the minimum investment return from Part X for each						
	year listed				ļ		
Ь	85% of line 2a						
C	Qualifying distributions from Part					}	
	XII, line 4 for each year listed						
d	Amounts included in line 2c not			1		,	
	used directly for active conduct of exempt activities						
е	Qualifying distributions made						
	directly for active conduct of		1			Ì	
	exempt activities. Subtract line 2d from line 2c						
3	Complete 3a, b, or c for the						
_	"Assets" alternative test - enter				1	- 1	
d-							
	(1) Value of all assets (2) Value of assets qualifying		7		<u> </u>		
	under section		1	11		j	
h	4942(j)(3)(B)(i)			 	+		
	enter 2/3 of minimum invest-				j		
	ment return shown in Part X,		//			}	
	line 6 for each year listed						
С	"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)(m)			<u> </u>			
	(3) Largest amount of sup- port from an exempt						
	organization	/					
_	(4) Gross investment income.	<u> </u>			<u> </u>		<u> </u>
Pai				t only if the founda	ition had \$5,	000 or more	in assets at
	any time d	uring the year - see	instructions.)				
1	Information Regarding	•					
a	List any managers of						the foundation
	before the close of any	y tax year (but only if th	ney nave contributed	more than \$5,000). (S	see section 50	((a)(2).)	
	N/A						
b	List any managers of					equally large	portion of the
	ownership of a partner	rship or other entity) o	f which the foundation	on has a 10% or greate	r interest.		
	N/A						
2	Information Regarding	g Contribution, Grant,	Gift, Loan, Scholars	hip, etc., Programs:			-
	Check here ► X if	the foundation only	makes contributions	s to preselected char	ritable organiz	ations and do	es not accep
	unsolicited requests f	or funds. If the found	ation makes gifts, g	rants, etc., to individu	als or organiza	itions under otl	her conditions
	complete items 2a, b,	c, and d. See instruction	ons.				
a	The name, address, ar	nd telephone number o	or email address of th	e person to whom app	lications shoul	d be addressed:	
b	The form in which app	olications should be su	bmitted and informa	tion and materials they	should include		
	••			•			
c	Any submission deadl	ines:					
_	, =====================================						
4	Any restrictions or I	imitations on awards	such as by gen	raphical areas charit	table fields by	nds of inetitut	ions or othe
_	factors:		, 222 20 27 9000	,,a. arous, ondill	maida, Ki	or manual	, 5. 56.

Part XV Supplementary Information (continued)

Page **11**

3 Grants and Contributions Paid Durin Recipient Name and address (home or business)	g the Year or Appro	ved for F	uture Payment	
Recipient	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	contribution	
a Paid during the year				
SEE STATEMENT 23				1,363,535.
				-
		:		
Total			▶ 3a	1,363,535.
b Approved for future payment			Ţ_	
_ / pp/oto210/ value o payo				
		1		
Total	<u> </u>		▶ 3b	

Form 990-PF (usina Asti	witios		<u>-</u>	Page 12
	amounts unless otherwise indicated.		ited business income	Excluded by	section 512, 513, or 514	(e)
J	service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
						
	 [
						<u>-</u>
	and contracts from government agencies					
2 Members	ship dues and assessments					
3 Interest or	n savings and temporary cash investments •			1 1 4	652.055	
	s and interest from securities			14	653,075.	
	al income or (loss) from real estate					
	financed property					
	I income or (loss) from personal property					
	vestment income	l .				
8 Gain or (lo	oss) from sales of assets other than inventory			18	74,808.	
9 Net inco	me or (loss) from special events 🕠 🕟					
,	ofit or (loss) from sales of inventory					
	venue a DERAL TAX REFUND			1	4,749.	
	DEKAH TAX KETOND			+ -	4,749.	
	-			<u> </u>		
е						
12 Subtotal.	. Add columns (b), (d), and (e)				732,632.	
	dd line 12, columns (b), (d), and (e)				13	732,632.
Part XVI-	B Relationship of Activities		lish	Sugarant Design		
Line No. ▼	Explain below how each activit accomplishment of the foundation					
					4	
			NOT APPLICABI	Ŀ		- <u> </u>
			· · · · · · · · · · · · · · · · · · ·			
JSA						Form 990-PF (2017)

Part XVII	Information R Exempt Organ		isters to and Trai	isactions a	and Relationships With No	incharit	able	
1 Ord the			scage in any of the fo	diw pawallo	any other organization describe	4	Yes	Nο
					ection 527, relating to politic			
	ations?			, • ••	out of the politice	" {		
		s foundation to a	noncharitable exemp	t organization	of	- { }		
		=	•	_		. 18(1)		Х
• •					· • • • • • • • • • • • • • • • • • • •			<u>x</u>
	ransactions:			· · · · · · · ·		1a(2)	-	
		abasitabla ayams	t arannostian			105/01		X
						1 1		$\frac{\Lambda}{X}$
							-	$\frac{\Lambda}{X}$
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								$\frac{\Lambda}{X}$
	-				* * * * * * * * * * * * * * * * * * * *		-	X
					· • · • · · · · · · · · · · · · · · · ·			$\frac{\Lambda}{X}$
					e. Column (b) should always si			
u ii u ii u	of the anode other:	SCEEDS OF SOURCE	e alven by the rena	ning schoolie	on. If the foundation received I	non than	fair int	J/KEL
value i	n any transaction or	sharing arrange	ment, show in colum	in (d) the vali	ue of the goods, other assets, o	rearvice:	4 TACO	naari maari
(a) Line no.	(b) Amount involved		ncharitable exempt organiza		Description of transfers, transactions, and			
10, 2	(2) 75 (10 4) (10 4)	10,710,700 01 7,50		10,0	Description of Autoreta, a prisocontra, and	2110:1116 G1 1 E	orgenies:	
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		 	·····					—
		 		- 				
		 						
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2a is the	foundation directly	or indirectly affil	isted with, or related	to, one or o	nore tax-exempt organizations			
	·					. 🔲 Ye	zs 🔀	No
b If Yes,	complete the follow							
	(a) Name of organizatio	<u>n</u>	(b) Type of organ	ization	(c) Description of rela	vonship		
			····					
								
								
	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1		d New York to the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the		and statements, and to the best of my kno-			
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	KAREN J KISE		Fusing"	man	05/07/2018 self-employe			<u>7</u>
Preparer		NK OF AMERI	.CA ,		Rm'eBN ► 9	4-1687	665	
Use Only		O BOX 1802						
		ROVIDENCE,	RI	02901-	1802 Phone no. 888	<u>-866-3</u>		
						Form 991	0-PF (2017]

Schedule B

(Form 990, 990-EZ. or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990for the latest information. OMB No 1545-0047

Employer identification number

95-3697275 MARTHA & IRV KAPLAN FOUNDATION 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 501(c)(3) exempt private foundation Form 990-PF 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 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).

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 MARTHA & IRV KAPLAN FOUNDATION Employer identification number 95-3697275

Part I	Contributors (see instructions). Use duplicate copies	s of Part I if additional space is ne	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JORDAN KAPLAN 1425 MONACO DRIVE	\$ 4 ,946,205.	Person X Payroll X Noncash X
	PACIFIC PLSDS, CA 90272-2724		(Complete Part II for noncash contributions.)
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2_	JORDAN KAPLAN 1425 MONACO DRIVE PACIFIC PLSDS, CA 90272-2724	\$\$,892,410.	Person X Payroll X Noncash X (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 Payroli 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.)

Name of organization

MARTHA & IRV KAPLAN FOUNDATION

Employer identification number

95-3697275

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	DOUGLAS EMMETT STOCK		
1_	127,875 SHARES		
		\$\$.	02/08/2017
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	DOUGLAS EMMETT STOCK		
2	255,750 SHARES		
		\$ 9,892,410.	02/08/2017
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
		Ψ	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 •	

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No.

from

Part I

(c)

FMV (or estimate)

(See instructions.)

(b)

Description of noncash property given

(d)

Date received

SECURITIES	
FROM	
INTEREST	
AND	=====
DIVIDENDS	
1	ii
PART I	
RM 990PF,	
FO	II

NET INVESTMENT INCOME	1,436. 5,873. 26. 11. 145,406.
REVENUE AND EXPENSES PER BOOKS	100. 1,436. 500,223. 5,873. 26. 11. 145,406.
DESCRIPTION	USGI REPORTED AS NONQUALIFIED DIVIDENDS FOREIGN DIVIDENDS NONDIVIDEND DISTRIBUTIONS DOMESTIC DIVIDENDS US GOVERNMENT INTEREST REPORTED AS QUALI NONQUALIFIED FOREIGN DIVIDENDS NONQUALIFIED DOMESTIC DIVIDENDS

STATEMENT

FORM 990PF, PART I - OTHER INCOME

> REVENUE AND **EXPENSES** PER BOOKS

=========

DESCRIPTION

FEDERAL TAX REFUND

4,749.

TOTALS

4,749.

13:05:19
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GZW502

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LEGAL
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PART
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990PF

MARTHA & IRV KAPLAN FOUNDATION

CHARITABLE PURPOSES	325.	# # # # # #	
ADJUSTED NET INCOME		11 11 11	
NET INVESTMENT INCOME		 	
REVENUE AND EXPENSES PER BOOKS	325.	325=======	
DESCRIPTION	LEGAL FEES - PRINCIPAL (ALLOCA	TOTALS	

STATEMENT 3

95-3697275

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FORM 990PF, PART I - A	- ACCOUNTING FEES			
NOTEGIO		REVENUE AND EXPENSES	NET INVESTMENT	ADJUSTED NET
			TINCOME.	
TAX PREPARATION FEE				
	TOTALS	3,500.	NONE	NONE

3,500.

CHARITABLE PURPOSES

3,500.

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95-3697275

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

CHARITABLE PURPOSES	1,123. 1,123
NET INVESTMENT INCOME	
REVENUE AND EXPENSES PER BOOKS	2,806. 2,806. 5,612.
DESCRIPTION	UST-MLT FEES AS AGENT UST-MLT FEES AS AGENT TOTALS

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95-3697275

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NET INVESTMENT INCOME	145.
REVENUE AND EXPENSES PER BOOKS	145. 987. 12. 1,144.
DESCRIPTION	FOREIGN TAXES EXCISE TAX ESTIMATES FOREIGN TAXES ON NONQUALIFIED

7

STATEMENT

	OE S KS KS	100. 235.	 335. =====
ER EXPENSES	REVENUE AND EXPENSES PER BOOKS	PRINCI	TOTALS 335.
FORM 990PF, PART I - OTHER EXPENSES	DESCRIPTION	OTHER ALLOCABLE EXPENSE-PRINCI STATE FILING FEE	

100.

CHARITABLE PURPOSES 335.

i j

	STOCK	#######################################
FOUNDATION	- CORPORATE	
KAPLAN	PART II	
: IRV	OPF, I	11 11 11 11
HA &	066 1	
MART	FORM	11 12 13 11

				•
		BEGINNING		ENDING
DESCRIPTION		BOOK VALUE.) BOOK VALUE)
1 1 1 1 3 1 1		1 1 1 1 1 1 1 1		
25960P109 DOUGLAS EMMETT INC		14,398,050.	28,661,630.	32,067,080.
	TOTALS	14,398,050.	28,661,630.	32,067,080.

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STATEMENT

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INVESTMENTS
OTHER
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II
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PART
990PF, PART

	11			
	COST/ FMV	BEGINNING	ENDING	ENDING
DESCRIPTION	CORF	BOOK VALUE	BOOK VALUE	FMV
	!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!			!
025083882 AMERICAN CENTY ULTRA	ט		6,97	0,7
471023846 JANUS INVT FD OVERSE	บ		59,756.	84,6
628380404 FRANKLIN MUTUAL DISC	บ			79,6
922908108 VANGUARD INDEX TR 50	ບ			85,5
	บ		70,301.	189,9
89154Q521 TOUCHSTONE LARGE CAP	บ		-,	148,3
573012101 MARSICO INVT FD FOCU	บ		52,820.	58,
628380305 FRANKLIN MUTUAL BEAC	ט		•	50,5
BEGBALANCE	ŭ	38,946		
	TOTALS	438,946.	438,946.	788,339.
	ii	H H H H H H H H H H H H H H H H H H H		

FORM	990PF,	PART	III	- OTH	ER INC	CREASES	IN	NET	WORTH	OR	FUND	BALANCE	S
=====	======	=====	====	====	=== = :	======	===	====		===	=====		=

DESCRIPTION

AMOUNT

RESIDUAL FUNDS FIDELITY FMV/COST DIST TO DONOR ADVISED FUND 2,567. 72,450.

TOTAL

75,017.

FORM 990PF, PART III - OTHER DECRE	ASES IN	NET	WORTH	OR	FUND	BALANCES
DESCRIPTION						AMOUNT
RETURN OF CAPITAL ON SALE OF STOCK TAX COST ADJUSTMENT						3,565. 1,000.
	TOTAL					4,565.

FORM 990PF, PART VII-A - NEW SUBSTANTIAL CONTRIBUTORS

NAME AND ADDRESS

JORDAN KAPLAN 1425 MONACO DRIVE PACIFIC PLSDS, CA 90272-2724

FORM 990PF, PART VII-A, LINE 12 EXPLANATIONS

QUALIFYING DISTRIBUTIONS EXPLANATION

UCLA KAPLAN FUND - SEE ATTACHMENT

SECTION 170(c)(2)(B) PURPOSE EXPLANATION

THE DONATION WAS MADE TO A DONOR ADVISED FUND AT UCLA FOR ACADEMIC AND EDUCATIONAL.PURPOSES.

RECIPIENT NAME:

WATERKEEPER ALLIANCE, INC.

ADDRESS:

180 MAIDEN LN #603

NEW YORK, NY 10038

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

UNRESTRICTED GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 45,000.

RECIPIENT NAME:

VILLAGE ACADEMIES, INC.

ADDRESS:

401 7TH AVE, 18TH FL

NEW YORK, NY 10001

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

UNRESTRICTED GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

BOYS & GIRLS CLUBS OF AMERICA

ADDRESS:

1275 PEACHTREE ST NE

ATLANTA, GA 30309

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

UNRESTRICTED GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

NATIONAL MULTIPLE SCLEROSIS SOCIETY

ADDRESS:

733 THIRD AVE, 3RD FL

NEW YORK, NY 10017

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

UNRESTRICTED GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

TRUSTEES OF THE UNIVERSITY OF

PENNSYLVANIA

ADDRESS:

3800 SPRUCE ST

PHILADELPHIA, PA 19104

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

SUPPORT BASSER CENTER FOR BRCA

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

GEISINGER HEALTH SYSTEM FOUNDATION

ADDRESS:

100 N ACADEMY AVE

DANVILLE, PA 17822

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

UNRESTRICTED GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

MARTHA & IRV KAPLAN FOUNDATION 95-3697275 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

ULI FOUNDATION

ADDRESS:

2001 ST NW #200

WASHINGTON, DC 20036

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

UNRESTRICTED GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

PENNSYLVANIA STATE UNIVERSITY FAYETTE-

EBERLY CAMPUS

ADDRESS:

2201 UNIVERSITY DR

LEMONT FURNACE, PA 15456

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

UNRESTRICTED GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 100,000.

RECIPIENT NAME:

MARCH TO THE TOP-AFRICA

ADDRESS:

20300 VENTURA BLVD #16

WOODLAND HILLS, CA 91364

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

UNRESTRICTED GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 100,000.

MARTHA & IRV KAPLAN FOUNDATION 95-3697275 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

SUGAR RAY LEONARD FOUNDATION

ADDRESS:

21731 VENTURA BLVD #300

WOODLAND HILLS, CA 91364

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

UNRESTRICTED GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

GRADES OF GREEN, INC.

ADDRESS:

519 MAIN ST

EL SEGUNDO, CA 90245

RELATIONSHIP:

N/2

PURPOSE OF GRANT:

UNRESTRICTED GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 5,000.

RECIPIENT NAME:

ARODHUM INTERNATIONAL, INC.

ADDRESS:

1961 HORSE SHOE DR

TYSONS CORNER, WA 22182

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

UNRESTRICTED GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

MARTHA & IRV KAPLAN FOUNDATION 95-3697275 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: NAVY SEAL FOUNDATION, INC. ADDRESS: 1619 D STREET, BLDG 5326 VIRGINIA BEACH, VA 23455 RELATIONSHIP: N/A PURPOSE OF GRANT: UNRESTRICTED GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 15,000. RECIPIENT NAME: PARISH CATALYST ADDRESS: 11100 SANTA MONICA BLVD #1910 LOS ANGELES, CA 90025 RELATIONSHIP: N/A PURPOSE OF GRANT:

RECIPIENT NAME:
PALISADES WILL ROGERS 5 & 10 K RUN

AMOUNT OF GRANT PAID

FOUNDATION
ADDRESS:
552 ALMAR AVE

PACIFIC PALLISADES, CA 90272

UNRESTRICTED GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT:

RELATIONSHIP: N/A

PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID 5,000.

10,000.

95-3697275 MARTHA & IRV KAPLAN FOUNDATION FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: ST MARY'S ACADEMY ADDRESS: 1615 SW 5TH AVE PORTLAND, OR 97201 RELATIONSHIP: N/A PURPOSE OF GRANT: UNRESTRICTED GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 2,500. RECIPIENT NAME: CANINE COMPANIONS FOR INDEPENDENCE ADDRESS: PO BOX 446 SANTA ROSA, CA 95402 RELATIONSHIP: N/APURPOSE OF GRANT: UNRESTRICTED GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 25,000. RECIPIENT NAME: EPIDERMOLYSIS BULLOSA MEDICAL RESEARCH FDN ADDRESS: 2757 ANCHOR AVE LOS ANGELES, CA 90064 RELATIONSHIP: N/APURPOSE OF GRANT: UNRESTRICTED GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC

AMOUNT OF GRANT PAID

10,000.

95-3697275 MARTHA & IRV KAPLAN FOUNDATION FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: CATHOLIC BIG BROTHERS BIG SISTERS, INC. ADDRESS: 1530 JAMES M WOOD BLVD LOS ANGELES, CA 90015 **RELATIONSHIP:** N/A PURPOSE OF GRANT: UNRESTRICTED GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC 5,000. AMOUNT OF GRANT PAID RECIPIENT NAME: RECTOR WARDENS & VESTRYMEN OF ST MATTHEWS PARISH ADDRESS: 1031 BIENVENEDA AVE PACIFIC PALLISADES, CA 90272 RELATIONSHIP: N/APURPOSE OF GRANT: SUPPORT GOOD SAMARITAN HAITI FOUNDATION STATUS OF RECIPIENT: PC 2,500. AMOUNT OF GRANT PAID RECIPIENT NAME: UCLA KAPLAN FUND ADDRESS: 11248 BUNCHE HALL LOS ANGELES, CA 90095-1487 RELATIONSHIP: N/A PURPOSE OF GRANT: **EDUCATIONAL** FOUNDATION STATUS OF RECIPIENT: PC 472,535. AMOUNT OF GRANT PAID

RECIPIENT NAME:

PLANNED PARENTHOOD LOS ANGELES

ADDRESS:

400 W 30TH ST

LOS ANGELES, CA 90007

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

UNRESTRICTED GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

WINDWARD SCHOOL

ADDRESS:

11350 PALMS BLVD

LOS ANGELES, CA 90066

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

UNRESTRICTED GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

VENICE FAMILY CLINIC

ADDRESS:

604 ROSE AVE

VENICE, CA 90291

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

UNRESTRICTED GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

ЪС

RECIPIENT NAME:

LOS ANGELES JEWISH HOME FOR THE

AGING

ADDRESS:

7150 TAMPA AVE

RESEDA, CA 91335

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

UNRESTRICTED GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 6,000.

RECIPIENT NAME:

CHILDREN'S BURN FOUNDATION

ADDRESS:

5000 VAN NUYS BLVD #450

SHERMAN OAKS, CA 91403

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

UNRESTRICTED GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 3,000.

RECIPIENT NAME:

SANTA MONICA POLICE ACTIVITIES

LEAGUE

ADDRESS:

1401 OLYMPIC BLVD

SANTA MONICA, CA 90404

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

UNRESTRICTED GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 10,000. MARTHA & IRV KAPLAN FOUNDATION 95-3697275 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: LOS ANGELES WATERKEEPER ADDRESS: 120 BROADWAY #105 SANTA MONICA, CA 90401 RELATIONSHIP: N/APURPOSE OF GRANT: UNRESTRICTED GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 10,000. RECIPIENT NAME: LEARNING WITH A DIFFERENCE, INC. ADDRESS: 5461 LOUISE AVE

AMOUNT OF GRANT PAID

TOTAL GRANTS PAID:

ENCINO, CA 91316

SUPPORT FOR WESTMARK SCHOOL FOUNDATION STATUS OF RECIPIENT:

PURPOSE OF GRANT:

RELATIONSHIP:

N/A

1,363,535.

2,000.

FEDERAL FOOTNOTES

UCLA KAPLAN FUND QUALIFYING DISTRIBUTION TO DONOR ADVISED FUND DISTRIBUTION OF PROPERTY AT FAIR MARKET VALUE 11,500 SHARES OF DOUGLAS EMMETT INC STOCK COST \$400,085.00 FMV \$472,535.00

PART II - OTHER INCOME	
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DESCRIPTION	AMOUNT
FEDERAL TAX REFUND	4,749.
TOTAL OTHER INCOME	4,749.

PART II - OTHER EXPENSE

DESC	RIPTION					AMOUNT	

DESCRIPTION	AMOUNT
Legal Fees	325.
Accounting Fees	3,500.
Professional Fees	5,612.
OTHER ALLOCABLE EXPENSE-PRINCI	100.
STATE FILING FEE	235.
TOTAL OTHER EXPENSE	9,772.
