

For calendar year 2017, or tax year beginning 01-01-2017, and ending 12-31-2017

Name of foundation THE HERB ALPERT FOUNDATION		A Employer identification number 95-4191227	
Number and street (or P O box number if mail is not delivered to street address) 1414 6TH STREET		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code SANTA MONICA, CA 90401		B Telephone number (see instructions) (818) 528-3545	
G Check all that apply <div><input type="checkbox"/> Initial return</div> <div><input type="checkbox"/> Initial return of a former public charity</div> <div><input type="checkbox"/> Final return</div> <div><input type="checkbox"/> Amended return</div> <div><input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Name change</div>		D 1. Foreign organizations, check here 2 Foreign organizations meeting the 85% test, check here and attach computation	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 28,891,077		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here	
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) (Part I, column (d) must be on cash basis)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a)	(b)	(c)	(d)
		Revenue and expenses per books	Net investment income	Adjusted net income	Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	43,074			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	2,215	2,215		
	4 Dividends and interest from securities	545,453	545,453		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	6,264,305			
	b Gross sales price for all assets on line 6a	6,347,928			
	7 Capital gain net income (from Part IV, line 2)		6,264,305		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	11,265	11,265		
	12 Total. Add lines 1 through 11	6,866,312	6,823,238		
	13 Compensation of officers, directors, trustees, etc	530,000	0		0
	14 Other employee salaries and wages	240,396	0		0
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)	4,442	0		0
	b Accounting fees (attach schedule)	10,200	5,100		0
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	190,741	0		0
	19 Depreciation (attach schedule) and depletion	2,086	0		
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	284,796	37,685		0
	24 Total operating and administrative expenses. Add lines 13 through 23	1,262,661	42,785		0
	25 Contributions, gifts, grants paid	6,902,587			6,902,587
	26 Total expenses and disbursements. Add lines 24 and 25	8,165,248	42,785		6,902,587
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-1,298,936			
	b Net investment income (if negative, enter -0-)		6,780,453		
	c Adjusted net income(if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value			
Assets	1	Cash—non-interest-bearing	49,318	72,085	72,085		
	2	Savings and temporary cash investments	5,626,044	4,486,112	4,486,107		
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)					
	7	Other notes and loans receivable (attach schedule) ▶ _____ 4,233 Less allowance for doubtful accounts ▶ _____ 0	1,561	4,233	4,233		
	8	Inventories for sale or use					
	9	Prepaid expenses and deferred charges		3,089	3,089		
	10a	Investments—U S and state government obligations (attach schedule)					
	b	Investments—corporate stock (attach schedule)	856,867	856,832	24,124,404		
	c	Investments—corporate bonds (attach schedule)					
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
	12	Investments—mortgage loans	1,493	1,493	1,800		
	13	Investments—other (attach schedule)	352,961	171,115	197,807		
	14	Land, buildings, and equipment basis ▶ _____ 15,686 Less accumulated depreciation (attach schedule) ▶ _____ 14,134	731	1,552	1,552		
15	Other assets (describe ▶ _____)						
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	6,888,975	5,596,511	28,891,077			
Liabilities	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 (attach schedule)					
	22	Other liabilities (describe ▶ _____)	0	6,472			
	23	Total liabilities (add lines 17 through 22)	0	6,472			
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.						
	24	Unrestricted					
	25	Temporarily restricted					
	26	Permanently restricted					
	Foundations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 31.						
	27	Capital stock, trust principal, or current funds	0	0			
	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0	0			
	29	Retained earnings, accumulated income, endowment, or other funds	6,888,975	5,590,039			
30	Total net assets or fund balances (see instructions)	6,888,975	5,590,039				
31	Total liabilities and net assets/fund balances (see instructions) .	6,888,975	5,596,511				

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)	1	6,888,975
2	Enter amount from Part I, line 27a	2	-1,298,936
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	5,590,039
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	5,590,039

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a See Additional Data Table			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a See Additional Data Table			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	<div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div>	2	6,264,305
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?



Yes



No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2016	15,269,253	33,537,273	0 455292
2015	6,079,401	15,236,205	0 399010
2014	4,580,291	11,341,614	0 403848
2013	7,797,254	13,368,497	0 583256
2012	7,078,000	20,438,527	0 346307
2 Total of line 1, column (d)			2 2 187713
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3 0 437543
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5			4 28,891,553
5 Multiply line 4 by line 3			5 12,641,297
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 67,805
7 Add lines 5 and 6			7 12,709,102
8 Enter qualifying distributions from Part XII, line 4			8 6,902,587

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> 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 here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	135,609
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-)	2	0
3	Add lines 1 and 2.	3	135,609
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	135,609
6	Credits/Payments		
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	87,769
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	97,769
8	Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	1,512
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	39,352
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	
11	Enter the amount of line 10 to be Credited to 2018 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>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</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ _____ 0 (2) On foundation managers <input type="checkbox"/> \$ _____ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
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? <i>If "Yes," attach the statement required by General Instruction T</i>	5	No
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 conflict with the state law remain in the governing instrument?	6	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> CA		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	8b	Yes
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 taxable year beginning in 2017 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	Yes

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address HERBALPERTFOUNDATION.ORG	13	Yes	
14	The books are in care of FRAZIN AND CO CPA Telephone no (818) 528-3545			

Located at **16255 VENTURA BLVD SUITE 1250 ENCINO CA** ZIP+4 **91436**


15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year 15			
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country ▶	16	Yes	No

Part 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.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> 1b			
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 before the first day of the tax year beginning in 2017? <input type="checkbox"/> 1c			No
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))			
a	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
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 statement—see instructions). <input type="checkbox"/> 2b			
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
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 May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2017). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 3b			
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a			No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017? 4b			No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions).	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?	5b	No	
	Organizations relying on a current notice regarding disaster assistance check here. 			
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b	No	
	<i>If "Yes" to 6b, file Form 8870</i>			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	7b		

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
MATTHEW WILDER 1414 SIXTH ST SANTA MONICA, CA 90401	PROGRAM OFFICER 40 00	122,629	0	0
NANCEE ENYART 1414 SIXTH ST SANTA MONICA, CA 90401	EXECUTIVE ASST 40 00	117,767	0	0

Total number of other employees paid over \$50,000. 0

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
C4 GLOBAL COMMUNICATIONS INC 1625 17TH ST SUITE 6 SANTA MONICA, CA 90404	PUBLIC RELATIONS	60,010

Total number of others receiving over \$50,000 for professional services. 0

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	
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	
2	
All other program-related investments See instructions	
3	

Total. Add lines 1 through 3 0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	24,702,161
b	Average of monthly cash balances.	1b	4,289,200
c	Fair market value of all other assets (see instructions).	1c	340,165
d	Total (add lines 1a, b, and c).	1d	29,331,526
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	29,331,526
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	439,973
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	28,891,553
6	Minimum investment return. Enter 5% of line 5.	6	1,444,578

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	1,444,578
2a	Tax on investment income for 2017 from Part VI, line 5.	2a	135,609
b	Income tax for 2017 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	135,609
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	1,308,969
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	1,308,969
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	1,308,969

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	6,902,587
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	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	6,902,587
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 (see instructions).	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	6,902,587

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				1,308,969
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2017				
a From 2012.	6,106,839			
b From 2013.	7,153,789			
c From 2014.	4,131,628			
d From 2015.	5,395,513			
e From 2016.	13,919,965			
f Total of lines 3a through e.	36,707,734			
4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ <u>6,902,587</u>				
a Applied to 2016, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2017 distributable amount.				1,308,969
e Remaining amount distributed out of corpus	5,593,618			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	42,301,352			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions			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 (see instructions).	6,106,839			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	36,194,513			
10 Analysis of line 9				
a Excess from 2013.	7,153,789			
b Excess from 2014.	4,131,628			
c Excess from 2015.	5,395,513			
d Excess from 2016.	13,919,965			
e Excess from 2017.	5,593,618			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling. ▶					
b Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)					
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year 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 organization 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)) See Additional Data Table
b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:
Check here <input checked="" type="checkbox"/> 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. (see instructions) 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 should be submitted and information and materials they should include
c Any submission deadlines
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	6,902,587
b <i>Approved for future payment</i>				
Total			▶ 3b	0

Enter gross amounts unless otherwise indicated

Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
Enter gross amounts unless otherwise indicated				
1 Program service revenue				
a _____				
b _____				
c _____				
d _____				
e _____				
f _____				
g Fees and contracts from government agencies				
2 Membership dues and assessments. . . .				
3 Interest on savings and temporary cash investments				
523000		14	2,215	
4 Dividends and interest from securities. . . .				
523000		14	545,453	
5 Net rental income or (loss) from real estate				
a Debt-financed property.				
b Not debt-financed property.				
6 Net rental income or (loss) from personal property				
7 Other investment income.				
522100		18	11,265	
8 Gain or (loss) from sales of assets other than inventory				
523000		18	6,264,305	
9 Net income or (loss) from special events				
10 Gross profit or (loss) from sales of inventory				
11 Other revenue a _____				
b _____				
c _____				
d _____				
e _____				
12 Subtotal Add columns (b), (d), and (e). .				
	0		6,823,238	0
13 Total. Add line 12, columns (b), (d), and (e).				
				6,823,238

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash.	1a(1)		No
(2) Other assets.	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization.	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.	1b(2)		No
(3) Rental of facilities, equipment, or other assets.	1b(3)		No
(4) Reimbursement arrangements.	1b(4)		No
(5) Loans or loan guarantees.	1b(5)		No
(6) Performance of services or membership or fundraising solicitations.	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	1c		No

d If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	***** 2018-11-14 Date	***** Title	May the IRS discuss this return with the preparer shown below (see instr.)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Signature of officer or trustee			

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	SUSAN FRAZIN				P00233791
	Firm's name ▶ FRAZIN AND CO CPA				Firm's EIN ▶ 95-4545665
	Firm's address ▶ 16255 VENTURA BLVD 1250 ENCINO, CA 91436				Phone no (818) 528-3545

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
OCM PRINC OPPORTUNITIES FD IV	P		
OCM PRINC OPPORTUNITIES FD IV AIF	P		
OCM PRINC OPPORTUNITIES FD VII	P		
OCM PRINC OPPORTUNITIES FD VII AIF	P		
NORTHERN TRUST 1981	P		
WELLS FARGO	P		
CAPITAL GAINS DIVIDENDS	P		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
308,055			308,055
		8,284	-8,284
		68,502	-68,502
		6,802	-6,802
6,031,103		35	6,031,068
399			399
8,371			8,371

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			308,055
			-8,284
			-68,502
			-6,802
			6,031,068
			399
			8,371

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
HERB ALPERT 1414 SIXTH ST SANTA MONICA, CA 90401	CHAIRMAN 0 00	0	0	0
LANI HALL ALPERT 1414 SIXTH ST SANTA MONICA, CA 90401	VICE CHAIR 0 00	0	0	0
RONA SEBASTIAN 1414 SIXTH ST SANTA MONICA, CA 90401	PRESIDENT 40 00	530,000	0	0
PAUL FRIMMER 10100 SANTA MONICA BLVD STE 2200 LOS ANGELES, CA 90067	CFO 0 00	0	0	0
IAN WIENER 1800 AVENUE OF THE STARS 900 LOS ANGELES, CA 90067	SECRETARY 0 00	0	0	0
DAVID ALPERT 1414 SIXTH ST SANTA MONICA, CA 90401	ASSISTANT SECRETARY 0 00	0	0	0

Form 990PF Part XV Line 1a - 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).

HERB ALPERT
LANI HALL ALPERT

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
18TH STREET ARTS CENTER 1639 18TH ST SANTA MONICA, CA 90404	NONE		CHARITABLE	25,000
AMERICANS FOR THE ARTS 1000 VERMONT AVE NW WASHINGTON, DC 20005	NONE		CHARITABLE	25,000
ANGEL CITY ARTS520 BAUGHMAN AVE CLAREMONT, CA 91711	NONE		CHARITABLE	20,000
Total ▶ 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a Paid during the year				
ARTS FOR LA1149 S HILL ST STE H100 LOS ANGELES, CA 90015	NONE		CHARITABLE	10,000
ARTWORXLATHE HEART PROJECT 1140 N CITRUS AVE LOS ANGELES, CA 90038	NONE		CHARITABLE	30,000
BOYS AND GIRLS CLUB OF SAN GABRIEL VALLEY 328 S RAMONA AVE MONTEREY PARK, CA 91754	NONE		CHARITABLE	5,000
Total ▶ 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
CALIFORNIA ALLIANCE FOR ARTS EDUCATION 495 COLORADO BLVD PASADENA, CA 91101	NONE		CHARITABLE	15,000
CALIFORNIA DANCE INSTITUTE 3131 OLYMPIC BLVD 202 SANTA MONICA, CA 90404	NONE		CHARITABLE	25,000
CALIFORNIA INSTITUTE OF THE ARTS 24700 MCBEAN PARKWAY VALENCIA, CA 91355	NONE		CHARITABLE	654,687
Total ► 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
CALIFORNIA JAZZ FOUNDATION 14156 MAGNOLIA BLVD SHERMAN OAKS, CA 91423	NONE		CHARITABLE	5,000
CALIFORNIA STATE SUMMER SCHOOL FOR THE ARTS PO BOX 1077 SACRAMENTO, CA 95812	NONE		CHARITABLE	380,800
CALIFORNIA STATE UNIVERSITY NORTHRIDGE 18111 NORDHOFF ST NORTHRIDGE, CA 91330	NONE		CHARITABLE	80,000
Total ▶ 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
CASA 01012102 E FIRST ST LOS ANGELES, CA 90033	NONE		CHARITABLE	25,000
CASA LA201 CENTRE PLAZA 1100 MONTEREY PARK, CA 91754	NONE		CHARITABLE	2,000
CERES COMMUNITY PROJECT 7351 BODEGA AVE SEBASTOPOL, CA 95472	NONE		CHARITABLE	5,000
Total ▶ 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
CHRYSLIS1853 LINCOLN BLVD SANTA MONICA, CA 90404	NONE		CHARITABLE	100,000
COALITION FOR ENGAGED EDUCATION 4131 OLYMPIC BLVD SANTA MONICA, CA 90404	NONE		CHARITABLE	50,000
COMMUNITY ARTS PARTNERSHIP 24700 MCBEAN PARKWAY VALENCIA, CA 91355	NONE		CHARITABLE	100,000
Total ▶ 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
COMMUNITY PARTNERS FBO CIRCLE OF FRIENDS 1000 N ALAMEDA STS 240 LOS ANGELES, CA 90012	NONE		CHARITABLE	250
COMMUNITY PARTNERS FBO LA COMMONS 1000 N ALAMEDA STS 240 LOS ANGELES, CA 90012	NONE		CHARITABLE	25,000
COMMUNITY PARTNERS FBO LIBROS SCHMIBROS LENDING 1000 N ALAMEDA STS 240 LOS ANGELES, CA 90012	NONE		CHARITABLE	15,000
Total ▶ 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
COMMUNITY PARTNERS FBO WRITEGIRL 1000 N ALAMEDA STS 240 LOS ANGELES, CA 90012	NONE		CHARITABLE	20,000
CONCERN FOUNDATION 1026 S ROBERTSON BLVD LOS ANGELES, CA 90035	NONE		CHARITABLE	27,000
CONTRA TIEMPO4058 TILDEN AVE CULVER CITY, CA 90232	NONE		CHARITABLE	15,000
Total ▶ 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
DEPT OF CULTURAL AFFAIRS LOS ANGELES 201 N FIGUEROA 1400 LOS ANGELES, CA 90012	NONE		CHARITABLE	5,000
DIRECT RELIEF 6100 WALLACE BECKNELL RD SANTA BARBARA, CA 93117	NONE		CHARITABLE	5,000
DREAM A WORLD EDUCATION INC 256 ROBERTSON BLVD BEVERLY HILLS, CA 90211	NONE		CHARITABLE	25,000
Total ► 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
FRIENDS OF MALIBU URGENT CARE 23656 PACIFIC COAST HWY MALIBU, CA 90265	NONE		CHARITABLE	50,000
GHETTO FILM SCHOOL 79 ALEXANDER AVE 41A BRONX, CA 10454	NONE		CHARITABLE	15,000
GOOD PEOPLE FUND384 WYOMING AVE MILLBURN, CA 07041	NONE		CHARITABLE	225,000
Total ▶ 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
GRANTMAKERS CONCERNED WITH IMMIGRANTS & REFUGEES PO BOX 1100 SEBASTOPOL, CA 95473	NONE		CHARITABLE	10,000
GRANTMAKERS IN THE ARTS 4055 21ST AVE W SEATTLE, WA 98119	NONE		CHARITABLE	10,000
HISPANIC FEDERATION UNIDOS 55 EXCHANGE PL 5TH FLOOR NEW YORK, NY 10005	NONE		CHARITABLE	100,000
Total ▶ 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
HOMEBOY INDUSTRIES 130 W BRUNO ST LOS ANGELES, CA 90012	NONE		CHARITABLE	75,000
JAZZ AT LINCOLN CENTER 3 COLUMBUS CIR 12 NEW YORK, NY 10019	NONE		CHARITABLE	100,000
JAZZ EDUCATION NETWORK 45 WHISPER DR WORCESTER, MA 01609	NONE		CHARITABLE	20,000
Total ▶ 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
JERUSALEM FOUNDATION 420 LEXINGTON AVE 1645 NEW YORK, NY 10170	NONE		CHARITABLE	17,000
KJAZZ1500 COTNER AVE LOS ANGELES, CA 90025	NONE		CHARITABLE	25,000
LA GOAL4911 OVERLAND AVE CULVER CITY, CA 90230	NONE		CHARITABLE	2,500
Total ▶ 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
LEADERCOMM GLOBAL COMMUNITY 1615 DUKE ST ALEXANDRIA, VA 22314	NONE		CHARITABLE	75,000
LOS ANGELES CHAMBER ORCHESTRA 350 S FIGUEROA ST 183 LOS ANGELES, CA 90071	NONE		CHARITABLE	5,000
LOS ANGELES CITY COLLEGE 855 N VERMONT AVE LOS ANGELES, CA 90029	NONE		CHARITABLE	5,000
Total ▶ 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a Paid during the year				
LOS ANGELES JAZZ SOCIETY 5903 NOBLE AVE VAN NUYS, CA 91411	NONE		CHARITABLE	30,000
LOS ANGELES PHILHARMONIC 151 S GRAND AVE LOS ANGELES, CA 90012	NONE		CHARITABLE	25,000
MADISON PROJECT FOUNDATION 1900 PICO BLVD SANTA MONICA, CA 90405	NONE		CHARITABLE	35,000
Total ▶ 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a Paid during the year				
MUSIC MENDS MINDS INC 2355 WESTWOOD BLVD LOS ANGELES, CA 90064	NONE		CHARITABLE	10,000
PASADENA ARTS COUNCIL 65 SOUTH GRAND AVE PASADENA, CA 91105	NONE		CHARITABLE	125,000
PEN CENTER WEST USAPO BOX 6037 BEVERLY HILLS, CA 90212	NONE		CHARITABLE	25,000
Total ▶ 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
PLANNED PARENTHOOD 400 WEST 30TH ST LOS ANGELES, CA 90007	NONE		CHARITABLE	3,000
PLAZA DE LA RAZA3540 N MISSION RD LOS ANGELES, CA 90031	NONE		CHARITABLE	25,000
PS ARTS1728 ABBOT KINNEY BLVD VENICE, CA 90291	NONE		CHARITABLE	225,000
Total ▶ 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
REDCAT24700 MCBEAN PARKWAY VALENCIA, CA 91355	NONE		CHARITABLE	25,000
REDISCOVER 12958 W WASHINGTON BLVD LOS ANGELES, CA 90066	NONE		CHARITABLE	20,000
RYAN'S REACH13 AUGUSTA COTO DE CAZA, CA 92679	NONE		CHARITABLE	5,000
Total ▶ 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
RYMAN ARTS1933 S BROADWAY LOS ANGELES, CA 90007	NONE		CHARITABLE	15,000
SKIRBALL CULTURAL CENTER 2701 N SEPULVEDA BLVD LOS ANGELES, CA 90049	NONE		CHARITABLE	30,000
SMMEFORG1645 16TH ST SANTA MONICA, CA 90404	NONE		CHARITABLE	5,000
Total ▶ 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
SOL-LA MUSIC ACADEMY 1812 STANFORD ST SANTA MONICA, CA 90404	NONE		CHARITABLE	25,000
SOUND AWARENESS INITIATIVE FBO SANTA MONICA YOUTH ORCHESTRA 1017 4TH ST SANTA MONICA, CA 90403	NONE		CHARITABLE	20,000
SOUTHERN CALIFORNIA GRANTMAKERS 1000 N ALAMEDA STS 240 LOS ANGELES, CA 90012	NONE		CHARITABLE	8,300
Total ▶ 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
SYMPHONIC JAZZ ORCHESTRA PO BOX 1421 CULVER CITY, CA 90232	NONE		CHARITABLE	15,000
THE ACTORS' GANG9070 VENICE BLVD CULVER CITY, CA 90232	NONE		CHARITABLE	20,000
THE ASCAP FOUNDATION ONE LINCOLN PLAZA NEW YORK, NY 10023	NONE		CHARITABLE	35,000
Total ▶ 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
THE CENTER ON PHILANTHROPY AND PUBLIC POLICY RALPH AND GOLDY LEWIS HALL 210 LOS ANGELES, CA 90089	NONE		CHARITABLE	10,000
THE GABRIELLA AXELRAD EDUCATION FOUNDATION 639 S COMMONWEALTH AVE LOS ANGELES, CA 90005	NONE		CHARITABLE	25,000
THE HARLEM SCHOOL OF THE ARTS 645 ST NICHOLAS AVE NEW YORK, NY 90030	NONE		CHARITABLE	400,000
Total ▶ 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
THE HARMONY PROJECT817 VINE ST LOS ANGELES, CA 90038	NONE		CHARITABLE	150,000
THE INTERNATIONAL TRUMPET GUILD PO BOX 2688 DAVENPORT, IA 52809	NONE		CHARITABLE	24,500
THE JAZZ BAKERY 1836 BENEDICT CYN DR BEVERLY HILLS, CA 90210	NONE		CHARITABLE	62,000
Total ▶ 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
THE JAZZ FOUNDATION 13205 CHELTENHAM DR SHERMAN OAKS, CA 91423	NONE		CHARITABLE	50,000
THE KENNEDY CENTER FBO TURNAROUND ARTS (PCAH) 2700 F ST NW WASHINGTON, DC 20566	NONE		CHARITABLE	100,000
THE LIBRARY FOUNDATION 630 W 5TH ST LOS ANGELES, CA 90071	NONE		CHARITABLE	25,000
Total ▶ 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
THE MR HOLLAND'S OPUS 4370 TUJUNGA AVE 330 STUDIO CITY, CA 91604	NONE		CHARITABLE	5,000
THE PAINTED TURTLE 17000 ELIZABETH LAKE RD LAKE HUGHES, CA 93532	NONE		CHARITABLE	50,000
THE RON FINLEY PROJECT 4501 EXPOSITION BLVD LOS ANGELES, CA 90016	NONE		CHARITABLE	15,000
Total ▶ 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a Paid during the year				
THE SOLDIERS PROJECT 4605 LANKERSHIM BLVD NORTH HOLLYWOOD, CA 91602	NONE		CHARITABLE	55,000
THE SOUTHERN POVERTY LAW CENTER 400 WASHINGTON AVE MONTGOMERY, AL 36104	NONE		CHARITABLE	30,000
THE WORLD STAGEPO BOX 8694 LOS ANGELES, CA 90008	NONE		CHARITABLE	10,000
Total ▶ 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
THELONIOUS MONK INSTITUTE 5225 WISCONSIN AVE NW WASHINGTON, DC 20015	NONE		CHARITABLE	250,000
TURNAROUND ARTS CALIFORNIA 12541 BEATRICE ST LOS ANGELES, CA 90066	NONE		CHARITABLE	100,000
UNIVERSITY OF CALIFORNIA LA FOUNDATION 1147 MURPHY HALL LOS ANGELES, CA 90095	NONE		CHARITABLE	231,374
Total ▶ 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
UNIVERSITY OF OREGON 1720 E 13TH AVE 410 EUGENE, OR 97403	NONE		CHARITABLE	5,000
UNIVERSITY OF SOUTHERN CALIFORNIA 1149 S HILL ST STE H100 LOS ANGELES, CA 90015	NONE		CHARITABLE	10,000
UNUSUAL SUSPECTS THEATRE 3719 VERDUGO RD LOS ANGELES, CA 90065	NONE		CHARITABLE	30,000
Total ▶ 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
VENICE ARTS1702 LINCOLN BLVD VENICE, CA 90291	NONE		CHARITABLE	40,000
VIRGINIA AVENUE PROJECT 3000 OLYMPIC BLVD SANTA MONICA, CA 90404	NONE		CHARITABLE	-10,824
VISION TO LEARN 11611 SAN VICENTE BL LOS ANGELES, CA 90049	NONE		CHARITABLE	20,000
Total ▶ 3a				6,902,587

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
VISTA DEL MAR CHILD AND FAMILY SERVICES 3200 MOTOR AVE LOS ANGELES, CA 90034	NONE		CHARITABLE	2,000,000
YOUNG STORYTELLERS FOUNDATION 923 E THIRD ST LOS ANGELES, CA 90013	NONE		CHARITABLE	35,000
YOUTH SPEAK COLLECTIVE 444 SOUTH BRAND BLVD 201 SAN FERNANDO, CA 91340	NONE		CHARITABLE	25,000
Total ► 3a				6,902,587

TY 2017 Accounting Fees Schedule**Name:** THE HERB ALPERT FOUNDATION**EIN:** 95-4191227**Accounting Fees Schedule**

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	10,200	5,100		0

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Depreciation Schedule

Name: THE HERB ALPERT FOUNDATION
EIN: 95-4191227

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
COMPUTER EQUIPMENT	2003-10-13	1,754	877	200DB	5 000000000000	0	0		
OFFICE EQUIPMENT	2004-11-03	2,583	2,583	200DB	5 000000000000	0	0		
OFFICE EQUIPMENT	2004-11-15	2,834	2,834	200DB	5 000000000000	0	0		
OFFICE EQUIPMENT	2006-03-03	1,211	1,211	200DB	5 000000000000	0	0		
OFFICE EQUIPMENT	2013-05-31	2,112	874	200DB	5 000000000000	122	0		
MAC COMPUTER	2015-07-07	2,285	593	200DB	5 000000000000	219	0		
IMAC COMPUTER	2017-03-22	2,907		200DB	5 000000000000	1,745	0		

TY 2017 Investments Corporate Stock Schedule**Name:** THE HERB ALPERT FOUNDATION**EIN:** 95-4191227

Name of Stock	End of Year Book Value	End of Year Fair Market Value
EQUITY SECURITIES HELD AT NORTHERN TRUST A/C#1981	856,832	24,124,404

TY 2017 Investments - Other Schedule**Name:** THE HERB ALPERT FOUNDATION**EIN:** 95-4191227**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
INVESTMENT-OCM PRINCIP OPPORT FD IV	FMV	82,807	89,269
INVESTMENT-OCM PRINCIP OPPORT FD IV AIF	FMV	0	18,039
INVESTMENT-OCM PRINCIP OPPORT FD VII	FMV	58,700	60,950
INVESTMENT-OCM PRINCIP OPPORT FD VII AIF	FMV	29,608	29,549

**TY 2017 Land, Etc.
Schedule****Name:** THE HERB ALPERT FOUNDATION**EIN:** 95-4191227

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
COMPUTER EQUIPMENT	1,754	1,754	0	
OFFICE EQUIPMENT	2,583	2,583	0	
OFFICE EQUIPMENT	2,834	2,834	0	
OFFICE EQUIPMENT	1,211	1,211	0	
OFFICE EQUIPMENT	2,112	2,052	60	
MAC COMPUTER	2,285	1,955	330	
IMAC COMPUTER	2,907	1,745	1,162	

TY 2017 Legal Fees Schedule**Name:** THE HERB ALPERT FOUNDATION**EIN:** 95-4191227

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	4,442	0		0

TY 2017 Other Expenses Schedule**Name:** THE HERB ALPERT FOUNDATION**EIN:** 95-4191227**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
AUTO	3,193	0		0
DUES AND SUBSCRIPTIONS	3,862	0		0
HOSPITALITY	2,443	0		0
EQUIPMENT REPAIRS	2,250	0		0
FREIGHT / MESSENGER	36	0		0
INSURANCE	7,955	0		0
INVESTMENT FEES	33,487	33,487		0
OFFICE EXPENSE	2,894	0		0
TELEPHONE	1,153	0		0
PUBLIC RELATIONS	62,968	0		0

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL PROCESSING	2,771	0		0
TRAVEL	13,827	0		0
EMPLOYEE BENEFITS	89,522	0		0
EDUCATION/SEMINARS	1,550	0		0
WEBSITE DESIGN & MAINTENANCE	22,000	0		0
OCM PRINC OPP FD IV OTHER DEDUCTIONS	934	934		0
OCM PRINC OPP FD IV AIF OTHER DEDUCTIONS	65	65		0
OCM PRINC OPP FD VII OTHER DEDUCTIONS	317	317		0
OCM PRINC OPP FD VII AIF - PORTFOLIO DEDUCTIONS	2,882	2,882		0
BUILDING - REPAIRS & MAINTENANCE	13,126	0		0

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BUILDING - SECURITY	439	0		0
BUILDING - UTILITIES	4,620	0		0
BUILDING - OVERHEAD COSTS	11,508	0		0
BUILDING - SUPPLIES	994	0		0

TY 2017 Other Income Schedule**Name:** THE HERB ALPERT FOUNDATION**EIN:** 95-4191227**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
OCM PRINC OPP FD IV	13,134	13,134	13,134
OCM PRINC OPP FD IV AIF	-421	-421	-421
OCM PRINC OPP FD VII	-1,448	-1,448	-1,448

TY 2017 Other Liabilities Schedule**Name:** THE HERB ALPERT FOUNDATION**EIN:** 95-4191227

Description	Beginning of Year - Book Value	End of Year - Book Value
403B LIABILITY	0	1,050
INVESTMENT OCM PRINC OPP. FD IV AIF	0	5,422

**TY 2017 Substantial Contributors
Schedule****Name:** THE HERB ALPERT FOUNDATION**EIN:** 95-4191227**Name****Address**

HERB AND LANI ALPERT

1414 SIXTH STREET
SANTA MONICA, CA 90401

TY 2017 Taxes Schedule**Name:** THE HERB ALPERT FOUNDATION**EIN:** 95-4191227

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAXES	35,209	0		0
BUILDING - PROPERTY TAX	12,386	0		0
STATE TAXES	10	0		0
FEDERAL TAXES,NET OF STATE REFUND	143,078	0		0
TAX AND LICENSES	58	0		0

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93491319019398	
<div>Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service</div>		<div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF</div> <div>▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990</div>			<div>OMB No 1545-0047</div> <div>2017</div>
<div>Name of the organization</div> <div>THE HERB ALPERT FOUNDATION</div>				<div>Employer identification number</div> <div>95-4191227</div>	
<div>Organization type (check one)</div>					
<div>Filers of:</div> <div>Form 990 or 990-EZ</div> <div>Form 990-PF</div>					
<div>Section:</div> <div><div><input type="checkbox"/> 501(c)() (enter number) organization</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation</div><div><input type="checkbox"/> 527 political organization</div><div><input checked="" type="checkbox"/> 501(c)(3) exempt private foundation</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation</div><div><input type="checkbox"/> 501(c)(3) taxable private foundation</div></div>					
<div>Check if your organization is covered by the General Rule or a Special Rule.</div> <div>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</div>					
<div>General Rule</div> <div><input checked="" type="checkbox"/> 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 other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.</div>					
<div>Special Rules</div> <div><input type="checkbox"/> For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% 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.</div> <div><input type="checkbox"/> 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 <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.</div> <div><input type="checkbox"/> 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 <i>exclusively</i> 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 <i>exclusively</i> religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . ▶ \$</div>					
<div>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 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).</div>					
<div>For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF</div> <div>Cat No 30613X</div> <div>Schedule B (Form 990, 990-EZ, or 990-PF) (2017)</div>					

Name of organization THE HERB ALPERT FOUNDATION	Employer identification number 95-4191227
-----------------------------------------------------------	-----------------------------------------------------

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	HERB LANI ALPERT 1414 6TH STREET SANTA MONICA, CA 90401	\$ 43,074	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

95-4191227

Part II

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

Name of organization THE HERB ALPERT FOUNDATION	Employer identification number 95-4191227
-----------------------------------------------------------	-----------------------------------------------------

Part III	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 completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____ Use duplicate copies of Part III if additional space is needed
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
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	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
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	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
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	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
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	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
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