

Form 990-PF

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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

- Do not enter social security numbers on this form as it may be made public.
- Go to www.irs.gov/Form990PF for instructions and the latest information.

2018

Open to Public
Inspection

For calendar year 2018, or tax year beginning 01-01-2018, and ending 12-31-2018

<p>Name of foundation LIFERAY FOUNDATION</p> <p>Number and street (or P O box number if mail is not delivered to street address) 1400 MONTEFINO AVENUE NO 100</p> <p>City or town, state or province, country, and ZIP or foreign postal code DIAMOND BAR, CA 91765</p> <p>G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change</p> <p>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</p> <p>I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ►\$ 4,395,444</p>		<p>A Employer identification number 35-2342014</p> <p>B Telephone number (see instructions) (626) 367-8598</p> <p>C If exemption application is pending, check here ► <input type="checkbox"/></p> <p>D 1. Foreign organizations, check here ► <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation ► <input type="checkbox"/></p> <p>E If private foundation status was terminated under section 507(b)(1)(A), check here ► <input type="checkbox"/></p> <p>F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► <input type="checkbox"/></p>		
		<p>J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____</p> <p>(Part I, column (d) must be on cash basis)</p>		
<p>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))</p>		<p>(a) Revenue and expenses per books</p> <p>(b) Net investment income</p> <p>(c) Adjusted net income</p> <p>(d) Disbursements for charitable purposes (cash basis only)</p>		
Revenue	1 Contributions, gifts, grants, etc, received (attach schedule)	1,200,100		
	2 Check ► <input type="checkbox"/> if the foundation is not required to attach Sch B			
	3 Interest on savings and temporary cash investments	3,957	3,957	3,957
	4 Dividends and interest from securities	21,798	21,798	21,798
	5a Gross rents	123,036	123,036	123,036
	b Net rental income or (loss) -4,092			
	6a Net gain or (loss) from sale of assets not on line 10	48		
	b Gross sales price for all assets on line 6a 48			
	7 Capital gain net income (from Part IV, line 2)		48	
	8 Net short-term capital gain			0
	9 Income modifications			
	10a Gross sales less returns and allowances			
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)				
12 Total. Add lines 1 through 11	1,348,939	148,839	148,791	
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	63,046	0	0
	14 Other employee salaries and wages			
	15 Pension plans, employee benefits	12,513	0	0
	16a Legal fees (attach schedule)	212	212	212
	b Accounting fees (attach schedule)	11,575	0	0
	c Other professional fees (attach schedule)	580	580	580
	17 Interest			
	18 Taxes (attach schedule) (see instructions)	31,517	26,654	26,654
	19 Depreciation (attach schedule) and depletion	54,751	53,548	53,548
	20 Occupancy			
	21 Travel, conferences, and meetings	10,933	0	0
	22 Printing and publications			
	23 Other expenses (attach schedule)	74,320	44,931	44,931
	24 Total operating and administrative expenses.	259,447	125,925	125,925
Add lines 13 through 23			132,319	
25 Contributions, gifts, grants paid	818,197		818,197	
26 Total expenses and disbursements. Add lines 24 and 25	1,077,644	125,925	125,925	
27 Subtract line 26 from line 12			950,516	
a Excess of revenue over expenses and disbursements	271,295			
b Net investment income (if negative, enter -0-)		22,914		
c Adjusted net income (if negative, enter -0-)			22,866	

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		255,677	136,954	136,954
2	Savings and temporary cash investments		1,291,808	1,220,657	1,220,657
3	Accounts receivable ►				
	Less allowance for doubtful accounts ►				
4	Pledges receivable ►				
	Less allowance for doubtful accounts ►				
5	Grants receivable				
6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
7	Other notes and loans receivable (attach schedule) ►				
	Less allowance for doubtful accounts ►				
8	Inventories for sale or use				
9	Prepaid expenses and deferred charges		207	207	207
10a	Investments—U S and state government obligations (attach schedule)				
b	Investments—corporate stock (attach schedule)				
c	Investments—corporate bonds (attach schedule)				
11	Investments—land, buildings, and equipment basis ►	2,101,296			
	Less accumulated depreciation (attach schedule) ►	88,160	2,066,591	2,013,136	2,013,136
12	Investments—mortgage loans				
13	Investments—other (attach schedule)				
14	Land, buildings, and equipment basis ►				
	Less accumulated depreciation (attach schedule) ►				
15	Other assets (describe ►)	508,988	508,988	1,021,846	1,024,490
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)		4,123,271	4,392,800	4,395,444
Liabilities					
17	Accounts payable and accrued expenses		1,552	498	
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 ►)	4,812	4,812	4,100	
23	Total liabilities (add lines 17 through 22)		6,364	4,598	
Net Assets or Fund Balances					
	Foundations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
24	Unrestricted		4,116,907	4,388,202	
25	Temporarily restricted				
26	Permanently restricted				
	Foundations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 27 through 31.				
27	Capital stock, trust principal, or current funds				
28	Paid-in or capital surplus, or land, bldg , and equipment fund				
29	Retained earnings, accumulated income, endowment, or other funds				
30	Total net assets or fund balances (see instructions)		4,116,907	4,388,202	
31	Total liabilities and net assets/fund balances (see instructions)		4,123,271	4,392,800	

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	4,116,907
2	Enter amount from Part I, line 27a	2	271,295
3	Other increases not included in line 2 (itemize) ►	3	0
4	Add lines 1, 2, and 3	4	4,388,202
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	4,388,202

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.)
1 a CAPITAL GAINS DIVIDENDS		P		
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 48			48	
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				
(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	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
a			48	
b				
c				
d				
e				
2 Capital gain net income or (net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7		2	48
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	0

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

 Yes No

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

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))
2017	777,993	2,236,288	0 347895
2016	2,103,124	2,887,389	0 728383
2015	901,396	2,029,673	0 444109
2014	488,219	540,549	0 903191
2013	601,174	611,734	0 982738
2 Total of line 1, column (d)			2 3 406316
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years			3 0 681263
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5			4 2,526,051
5 Multiply line 4 by line 3			5 1,720,905
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 229
7 Add lines 5 and 6			7 1,721,134
8 Enter qualifying distributions from Part XIII, line 4			8 950,516

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)	1	458
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		
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	458
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	458
6	Credits/Payments		
a	2018 estimated tax payments and 2017 overpayment credited to 2018	6a	0
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	0
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments Add lines 6a through 6d.	7	0
8	Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ►	9	458
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 2019 estimated tax ►	Refunded	11

Part 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 participate or intervene in any political campaign?	1a	Yes	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition).	1b	Yes	No
<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>				
c	Did the foundation file Form 1120-POL for this year?	1c	Yes	No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ► \$ _____ 0 (2) On foundation managers ► \$ _____ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ _____ 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	Yes	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	Yes	No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	Yes	No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	Yes	No
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	Yes	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	No
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	No
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ►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	No
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 2018 or the taxable year beginning in 2018? See the instructions for Part XIV <i>If "Yes," complete Part XIV</i>	9	Yes	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	No

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 ►N/A	13	Yes
14	The books are in care of ►THE FOUNDATION	Telephone no ►(626) 367-8598	
Located at ►1400 MONTEFINO AVENUE NO 100 DIAMOND BAR CA			ZIP+4 ►91765
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here. and enter the amount of tax-exempt interest received or accrued during the year.	► <input type="checkbox"/> 15	
16	At any time during calendar year 2018, 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 the instructions for exceptions and filing requirements for FinCEN Form 114. 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.

		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<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. Organizations relying on a current notice regarding disaster assistance check here.	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 2018?	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 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? If "Yes," list the years ► 20____, 20____, 20____, 20____	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
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)	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 2018 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 2018)	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 2018?	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))? (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Yes	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. Organizations relying on a current notice regarding disaster assistance check here.		5b	
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? <i>If "Yes," attach the statement required by Regulations section 53.4945-5(d)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No		
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	6b	No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <i>If "Yes" to 6b, file Form 8870</i>		7a	
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	7b	
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?			
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

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	(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) Expense account, 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	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

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	1,051,881
b	Average of monthly cash balances.	1b	1,512,638
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	2,564,519
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	2,564,519
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	38,468
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,526,051
6	Minimum investment return. Enter 5% of line 5.	6	126,303

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

1	Minimum investment return from Part X, line 6.	1	
2a	Tax on investment income for 2018 from Part VI, line 5.	2a	
b	Income tax for 2018 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	

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	950,516
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	950,516
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	950,516
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 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only.				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2018				
a From 2013.				
b From 2014.				
c From 2015.				
d From 2016.				
e From 2017.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2018 from Part XII, line 4 ► \$ _____				
a Applied to 2017, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2018 distributable amount.				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b.				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)				
8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2014.				
b Excess from 2015.				
c Excess from 2016.				
d Excess from 2017.				
e Excess from 2018.				

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 2018, enter the date of the ruling.	►	2008-06-23
b	Check box to indicate whether the organization is a private operating foundation described in section <input checked="" 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.		
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 foundation had \$5,000 or more in assets at any time during the year—see instructions.)**1 Information Regarding Foundation Managers:**

- a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))
- 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 ► if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

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
<i>a Paid during the year</i> See Additional Data Table				
Total				► 3a
<i>b Approved for future payment</i>				
Total				► 3b

Part XVI-A Analysis of Income-Producing Activities

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	
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			14	3,957	
4 Dividends and interest from securities.			14	21,798	
5 Net rental income or (loss) from real estate					
a Debt-financed property.					
b Not debt-financed property.			16	-4,092	
6 Net rental income or (loss) from personal property					
7 Other investment income.					
8 Gain or (loss) from sales of assets other than inventory			14	48	
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		21,711	
13 Total Add line 12, columns (b), (d), and (e).			13		21,711
(See worksheet in line 13 instructions to verify calculations.)					

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

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
CHARLES MAY	DIRECTOR OF OPERATIONS 12 00	0	0	0
283 HEATHCLIFF PL BREA, CA 92821				
DENNIS JU	EXECUTIVE DIRECTOR 12 00	0	0	0
436 N OXFORD AVE UNIT 106 LOS ANGELES, CA 90004				
BRIAN CHAN	BOARD MEMBER 1 00	0	0	0
362 TANGERINE PLACE BREA, CA 92823				
BRYAN CHEUNG	BOARD MEMBER 1 00	0	0	0
163 S KINGSLEY DR LOS ANGELES, CA 90004				
EDWIN CHUNG	BOARD MEMBER 1 00	0	0	0
18543 DEVONSHIRE ST 142 NORTHRIDGE, CA 91324				

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				
AMERICAN CIVIL LIBERTIES UNION FOUNDATION 125 BROAD STREET 18TH FLOOR NEW YORK, NY 10004	NONE	PUBLIC CHARITY	COMMUNITY WELLNESS	100
AVANT MINISTRIES 10000 N OAK TRAFFICWAY KANSAS CITY, MO 64155	NONE	PUBLIC CHARITY	EVANGELISM	3,000
CALSTATE FULLERTON PHILANTHROPIC FOUNDATION 2600 NUTWOOD AVE FULLERTON, CA 92831	NONE	PUBLIC CHARITY	EDUCATIONAL	1,000
Total			► 3a	818,197

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)				
<i>a Paid during the year</i>				
CHOC CHILDREN'S FOUNDATION 1201 W LA VETA AVE ORANGE, CA 92868	NONE	PUBLIC CHARITY	METABOLIC RESEARCH	109,250
COMPASSION 12290 VOYAGER PARKWAY COLORADO SPRINGS, CO 80921	NONE	PUBLIC CHARITY	COMMUNITY WELLNESS	500
DESIRING GOD 2112 BROADWAY STREET NE STE 150 MINNEAPOLIS, MN 55413	NONE	PUBLIC CHARITY	EVANGELISM	25,000
Total			► 3a	818,197

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				
ETHNOS360312 W FIRST ST SANFORD, FL 32771	NONE	PUBLIC CHARITY	EDUCATIONAL	500
FRIENDS OF ADVENTURE IN MISSIONS 3812 GRANDVIEW DR CARROLLTON, TX 75007	NONE	PUBLIC CHARITY	POOR EMPOWERMENT, HEALTH SERVICES AND EDUCATION	23,500
HAMILTON JR WOMEN'S LEAGUE 350 N 2ND STREET HAMILTON, OH 45011	NONE	PUBLIC CHARITY	POOR EMPOWERMENT	5,000
Total			► 3a	818,197

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)				
<i>a Paid during the year</i>				
HANDS FOR VIETNAM 170-D EAST MAIN ST PMB 241 HENDERSONVILLE, TN 37075	NONE	PUBLIC CHARITY	PUBLIC HEALTH	500
HELPLIVE INCPO BOX 9684 BREA, CA 92821	NONE	PUBLIC CHARITY	PUBLIC HEALTH	500
HOPE HARVEST INTERNATIONAL PO BOX 721914 SAN DIEGO, CA 92172	NONE	PUBLIC CHARITY	COMMUNITY WELLNESS	1,000
Total			► 3a	818,197

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)				
<i>a Paid during the year</i>				
HUCKLEBERRY YOUTH PROGRAM 3310 GEARY BLVD SAN FRANCISCO, CA 94118	NONE	PUBLIC CHARITY	EDUCATIONAL	500
INTERNATIONAL RESCUE COMMITTEE 122 EAST 42ND STREET NEW YORK, NY 10168	NONE	PUBLIC CHARITY	COMMUNITY WELLNESS	100
LIFEBRIDGEPO BOX 129 ASHBURN, VA 20146	NONE	PUBLIC CHARITY	COMMUNITY WELLNESS	470
Total			► 3a	818,197

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				
LITTLE TOKYO SERVICE CENTER 231 E THIRD STREET STE 6-106 LOS ANGELES, CA 90013	NONE	PUBLIC CHARITY	POOR EMPOWERMENT	500
OLIVE CREST 2130 EAST 4TH STREET STE 200 SANTA ANA, CA 92705	NONE	PUBLIC CHARITY	COMMUNITY WELLNESS	500
PESI555 CLYDE AVE MOUNTAIN VIEW, CA 94043	NONE	PUBLIC CHARITY	EVANGELISM	5,000
Total			► 3a	818,197

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)				
<i>a Paid during the year</i>				
PHILIP HAYDEN FOUNDATION 40335 WESTCHESTER RD E-115 TEMECULA, CA 92591	NONE	PUBLIC CHARITY	EDUCATIONAL	2,000
POMONA HOPE 401 N GIBBS ST POMONA, CA 91767	NONE	PUBLIC CHARITY	EDUCATIONAL	3,000
RAHAB'S DAUGHTERS 181 S NORTHWEST HWY CARY, IL 60013	NONE	PUBLIC CHARITY	COMMUNITY WELLNESS	7,486
Total			► 3a	818,197

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)				
<i>a Paid during the year</i>				
SAMARITAN'S PURSEPO BOX 3000 BOONE, NC 28607	NONE	PUBLIC CHARITY	EVANGELISM	2,500
SAN FRANCISCO SHANGHAI ASSOCIATION 2515 SAN BRUNO AVE SAN FRANCISCO, CA 94134	NONE	PUBLIC CHARITY	POOR EMPOWERMENT	10,000
SO EASTERN INDIANA VOICES FOR CHILDREN 217 E MAIN ST MADISON, IN 47250	NONE	PUBLIC CHARITY	COMMUNITY WELLNESS	500
Total			► 3a	818,197

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)				
<i>a Paid during the year</i>				
SOLIDARITYPO BOX 220 PLACENTIA, CA 92871	NONE	PUBLIC CHARITY	EVANGELISM	1,100
STAND TO REASON1438 E 33RD ST SIGNAL HILL, CA 90755	NONE	PUBLIC CHARITY	EVANGELISM	100,000
THE NAVIGATORSPo BOX 6079 ALBERT LEA, MN 56007	NONE	PUBLIC CHARITY	EVANGELISM	3,000
Total			► 3a	818,197

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				
TOGETHER WE RISE 580 W LAMBERT RD A BREA, CA 92821	NONE	PUBLIC CHARITY	COMMUNITY WELLNESS	2,400
WORLD VISIONPO BOX 70102 TACOMA, WA 98481	NONE	PUBLIC CHARITY	NEPAL EARTHQUAKE RELIEF	4,460
ZOE INTERNATIONAL MINISTRIES PO BOX 221510 SANTA CLARITA, CA 91322	NONE	PUBLIC CHARITY	EVANGELISM	5,375
Total			► 3a	818,197

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)				
<i>a Paid during the year</i>				
10000DEGREES 1650 LOS GAMOS DRIVE SUITE 110 SAN RAFAEL, CA 94903	NONE	PUBLIC CHARITY	COMMUNITY WELLNESS	151
AMERICAN HEART ASSOCIATION 7272 GREENVILLE AVE DALLAS, TX 75231	NONE	PUBLIC CHARITY	COMMUNITY WELLNESS	500
ASIAN YOUTH CENTER 100 WEST CLARY AVENUE SAN GABRIEL, CA 91776	NONE	PUBLIC CHARITY	COMMUNITY WELLNESS	500
Total			► 3a	818,197

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)				
<i>a Paid during the year</i>				
BIG BROTHER BIG SISTERS OC 1801 E EDINGER AVE SUITE 101 SANTA ANA, CA 92705	NONE	PUBLIC CHARITY	POOR EMPOWERMENT	3,950
BLIND CHILDREN'S LEARNING CENTER 18542-B VANDERLIP AVE SANTA ANA, CA 92705	NONE	PUBLIC CHARITY	COMMUNITY WELLNESS	1,000
CHINO VALLEY COMMUNITY CHURCH 14601 PEYTON DRIVE CHINO HILLS, CA 91709	NONE	PUBLIC CHARITY	COMMUNITY WELLNESS	500
Total			► 3a	818,197

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)				
<i>a Paid during the year</i>				
CORONA - NORCO SETTLEMENT HOUSE 507 S VICENTIA AVE CORONA, CA 92882	NONE	PUBLIC CHARITY	COMMUNITY WELLNESS	500
CROSSING BORDERS MINISTRY PO BOX 34 GLENVIEW, IL 60025	NONE	PUBLIC CHARITY	KOREA REFUGEE ASSISTANCE	10,000
DONORSCHOOSEORG 213 W 35TH STREET 2ND FLOOR EAST NEW YORK, NY 10001	NONE	PUBLIC CHARITY	EDUCATION	500
Total			► 3a	818,197

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)				
<i>a Paid during the year</i>				
DOWNS SYNDROME ASSOCIATION OF MEMPHIS 154 TIMBER CREEK DR 5 CORDOVA, TN 33018	NONE	PUBLIC CHARITY	EDUCATION	200
ELEVATION5985 E SETTLER COURT ANAHEIM, CA 92807	NONE	PUBLIC CHARITY	EDUCATION	500
EVANGELICAL FREE CHURCH OF DIAMOND BAR 3255 S DIAMOND BAR BLVD DIAMOND BAR, CA 91765	NONE	PUBLIC CHARITY	EVANGELISM	200,000
Total			► 3a	818,197

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)				
<i>a Paid during the year</i>				
EVERGREEN SGV 323 WORKMAN MILL RD LA PUENTE, CA 91746	NONE	PUBLIC CHARITY	EVANGELISM	975
EVERY WOMAN COUNTS 180 VARICK STREET SUITE 1116 NEW YORK, NY 10014	NONE	PUBLIC CHARITY	COMMUNITY WELLNESS	500
FAMILY PROMISE OF ORANGE COUNTY PO BOX 6225 ORANGE, CA 92863	NONE	PUBLIC CHARITY	PSYCHOLOGICAL CARE	250
Total			► 3a	818,197

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				
FULL COMPASS SYSTEMS LTD 9770 SILICON PRAIRIE PKWY MADISON, WI 53593	NONE	PUBLIC CHARITY	EDUCATIONAL	7,215
GIVING CHILDREN HOPE 8332 COMMONWEALTH AVE BUENA PARK, CA 90621	NONE	PUBLIC CHARITY	COMMUNITY WELLNESS	1,000
GLINTSPO BOX 962 WHEATON, IL 60187	NONE	PUBLIC CHARITY	PSYCHOLOGICAL CARE	3,000
Total			► 3a	818,197

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)				
<i>a Paid during the year</i>				
HABITAT KEMANUSIAAN 2201 BROADWAY 4TH FLOOR OAKLAND, CA 94612	NONE	PUBLIC CHARITY	INDONESIA EARTHQUAKE RELIEF	1,250
HAMTRAMCK COMMUNITY INITIATIVE 3401 EVALINE HAMTRAMCK, MI 48212	NONE	PUBLIC CHARITY	COMMUNITY WELLNESS	500
IGNIS COMMUNITY PO BOX 570936 DALLAS, TX 75357	NONE	PUBLIC CHARITY	REHABILITATION CENTER	100,000
Total			► 3a	818,197

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)				
<i>a Paid during the year</i>				
INTERNATIONAL TEAMS 411 WEST RIVER ROAD ELGIN, IL 60123	NONE	PUBLIC CHARITY	EVANGELISM	550
JAPANESE EVANGELICAL MISSIONARY SOCIETY 948 E 2ND ST LOS ANGELES, CA 90012	NONE	PUBLIC CHARITY	EVANGELISM	3,000
JOYCORPSPO BOX 8696 FAYETTEVILLE, AR 72703	NONE	PUBLIC CHARITY	COMMUNITY WELLNESS	30,000
Total			► 3a	818,197

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				
LIVING HOPE COMMUNITY CHURCH 1215 W LAMBERT ROAD BREA, CA 92821	NONE	PUBLIC CHARITY	COMMUNITY WELLNESS	12,000
MASTER PROVISIONS 7725 FOUNDATION DR FLORENCE, KY 41042	NONE	PUBLIC CHARITY	COMMUNITY WELLNESS	250
MERCY CORPS 45 SW ANKENY ST PORTLAND, OR 97204	NONE	PUBLIC CHARITY	INDONESIA EARTHQUAKE RELIEF	1,150
Total			► 3a	818,197

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)				
<i>a Paid during the year</i>				
RED BASKET 1700 FARNAM ST OMAHA, NE 68102	NONE	PUBLIC CHARITY	PUBLIC HEALTH	24,015
RONALD MCDONALD HOUSE CHARITIES OF SOCAL 4560 FOUNDAIN AVENUE LOS ANGELES, CA 90029	NONE	PUBLIC CHARITY	COMMUNITY WELLNESS	1,000
SANFORD CRISIS PREGNANCY CENTER 1002 FRENCH AVENUE SANFORD, FL 32771	NONE	PUBLIC CHARITY	EDUCATIONAL & COMMUNITY WELLNESS	1,000
Total			► 3a	818,197

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				
SF 49ERS ACADEMY 2695 FORDHAM STREET EAST PALO ALTO, CA 94303	NONE	PUBLIC CHARITY	ADOLESCENT SERVICES	500
SOUTH JERSEY ROBITICS INC PO BOX 753 SWEDESBORO, NJ 08318	NONE	PUBLIC CHARITY	SPONSORSHIP	500
ST JUDES CHILDREN'S RESEARCH HOSPITAL 12365 LEWIS STREET STE 101 GARDEN GROVE, CA 92840	NONE	PUBLIC CHARITY	COMMUNITY WELLNESS	1,000
Total			► 3a	818,197

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 ARCHIBALD PROJECT 5116 PROVENCIAL DRIVE AUSTIN, TX 78724	NONE	PUBLIC CHARITY	EDUCATIONAL	500
VENICE JAPANESE COMMUNITY CENTER 12448 BRADDOCK DRIVE LOS ANGELES, CA 90066	NONE	PUBLIC CHARITY	COMMUNITY WELLNESS	500
WPCC-OBRIA16147 E WHITTIER BLVD WHITTIER, CA 90603	NONE	PUBLIC CHARITY	PUBLIC HEALTH	90,000
Total			► 3a	818,197

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)				
<i>a Paid during the year</i>				
ONE WORLD CHILDREN'S FUND 1012 TORNEY AVE SUITE 201 SAN FRANCISCO, CA 94129	NONE	PUBLIC CHARITY	YOUTH SERVICES	500
Total			► 3a	818,197

TY 2018 Accounting Fees Schedule

Name: LIFERAY FOUNDATION**EIN:** 35-2342014

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	11,575	0	0	11,575

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

TY 2018 Depreciation Schedule

Name: LIFERAY FOUNDATION

EIN: 35-2342014

Depreciation Schedule

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
LAND	2017-05-24	630,000		L		0	0	0	
BUILDING	2017-05-24	1,470,000	33,409	SL	27 5000000000000	53,455	53,455	53,455	
FURNITURE & FIXTURES	2018-06-30	1,296		200DB	7 0000000000000	1,296	93	93	

TY 2018 Investments - Land Schedule

Name: LIFERAY FOUNDATION**EIN:** 35-2342014

Category/ Item	Cost/Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
LAND	630,000	0	630,000	
BUILDING	1,470,000	86,864	1,383,136	
FURNITURE & FIXTURES	1,296	1,296	0	

TY 2018 Legal Fees Schedule

Name: LIFERAY FOUNDATION**EIN:** 35-2342014

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	212	212	212	0

TY 2018 Other Assets Schedule

Name: LIFERAY FOUNDATION**EIN:** 35-2342014

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
MARKETABLE SECURITIES	508,988	1,021,846	1,024,490

TY 2018 Other Expenses Schedule

Name: LIFERAY FOUNDATION**EIN:** 35-2342014**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
SERVICE PROJECTS	25,892	0	0	25,892
MISCELLANEOUS	98	0	0	98
CONTRACTED SERVICE	300	0	0	300
PAYROLL PROCESSING FEES	540	0	0	540
BANK FEES	68	0	0	68
INSURANCE	1,578	0	0	1,578
WORKERS COMPENSATION	519	0	0	519
DUES & SUBSCRIPTIONS	2	0	0	2
POSTAGE	392	0	0	392
CLEANING EXPENSE	505	505	505	0

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LANDSCAPING	780	780	780	0
UTILITIES	8,625	8,625	8,625	0
INSURANCE	2,535	2,535	2,535	0
BANK CHARGES	36	36	36	0
MEALS	26	26	26	0
SUPPLIES	136	136	136	0
FACILITY MAINTENANCE	448	448	448	0
REPAIRS & MAINTENANCE	31,840	31,840	31,840	0

TY 2018 Other Liabilities Schedule

Name: LIFERAY FOUNDATION**EIN:** 35-2342014

Description	Beginning of Year - Book Value	End of Year - Book Value
CREDIT CARDS PAYABLE	712	0
SECURITY DEPOSIT	4,100	4,100

TY 2018 Other Professional Fees Schedule

Name: LIFERAY FOUNDATION**EIN:** 35-2342014

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROFESSIONAL FEES	580	580	580	0

TY 2018 Substantial Contributors

Schedule

Name: LIFERAY FOUNDATION

EIN: 35-2342014

Name	Address
FOR LIFE IOM LTD	TOP FLOOR 14 ATHOL STREET DOUGLAS IM
ZOE INTERNATIONAL MINISTRIES	PO BOX 221510 SANTA CLARITA, CA 91322
JUSTGIVE	PO BOX 300 SAN FRANCISCO, CA 94104

TY 2018 Taxes Schedule

Name: LIFERAY FOUNDATION**EIN:** 35-2342014

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CALIFORNIA TAX	10	0	0	10
LICENSE AND REGISTRATION	150	0	0	150
PAYROLL TAX	4,703	0	0	4,703
PROPERTY TAX	25,834	25,834	25,834	0
STATE TAX	800	800	800	0
LICENSE & FEES	20	20	20	0

Schedule B
(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

OMB No 1545-0047

- Attach to Form 990, 990-EZ, or 990-PF
- Go to www.irs.gov/Form990 for the latest information

2018**Name of the organization**
LIFERAY FOUNDATION**Employer identification number**
35-2342014**Organization type** (check one)**Filers of:****Section:**

Form 990 or 990-EZ

- 501(c)() (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions**General Rule**

- 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.

Special Rules

- 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.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc. purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc. purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc. contributions totaling \$5,000 or more during the year. ► \$ _____

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

Name of organization LIFERAY FOUNDATION		Employer identification number 35-2342014	
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	ZOE INTERNATIONAL MINISTRIES 24337 MAIN ST NEWHALL, CA 91321	\$ 100,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions)</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	FOR LIFE IOM LTD TOP FLOOR 14 ATHOL STREET DOUGLAS ISLE OF MAN, UK	\$ 1,100,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions)</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	JUST GIVE PO BOX 300 SAN FRANCISCO, CA 94104	\$ 100	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions)</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions)</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions)</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions)</small>

Name of organization

LIFERAY FOUNDATION

Employer identification number

35-2342014

Part II

Noncash Property

(a) No. from Part I		(See instructions) Use duplicate copies of Part II if additional space is needed (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
			\$	
(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
			\$	
(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
			\$	
(a) No. from Part I		(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
			\$	

Name of organization LIFERAY FOUNDATION			Employer identification number 35-2342014
Part III <i>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.) ► \$ _____</i> Use duplicate copies of Part III if additional space is needed			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift Transferee's name, address, and ZIP 4		Relationship of transferor to transferee