efile GRAPHIC print - DO NOT PROCESS

Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491310010679

2018

OMB No 1545-0052

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 <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

For	caler	ndar year 2018, or tax year beginning 01-01-2	018 , aı	nd ei	nding 12-31-	2018	
		ındatıon DATION			A Employer id	entification numbe	er
					47-2460579		
		d street (or P O box number if mail is not delivered to street address ARSON STREET SUITE 208	Room/suite		B Telephone nu	mber (see instructio	ns)
٠,	10 14 CF	ANSON STREET SOITE 200			(949) 644-6609)	
		n, state or province, country, and ZIP or foreign postal code TY, NV 89701	•		C If exemption	application is pendin	a, check here
		<u> </u>					▶ ⊔
G Cl	neck al		former public charity		1	ganızatıons, check h	▶ ⊔
		☐ Final return ☐ Amended return	1			ganizations meeting k here and attach co	
	1 . 4	✓ Address change ✓ Name change vpe of organization ✓ Section 501(c)(3) exempt private	£		E If private for	undation status was	terminated . \square
_		vpe of organization $lacksquare$ Section $501(c)(3)$ exempt private in 4947(a)(1) nonexempt charitable trust $lacksquare$ Other taxab			under sectio	n 507(b)(1)(A), chec	ck here
		ket value of all assets at end J Accounting method	☑ Cash ☐ Accru	ual	F If the founda	ation is in a 60-mont	h termination \Box
		from Part II, col (c), ▶\$ 1,046,161	t be on cash basıs)		under sectio	n 507(b)(1)(B), chec	ck here 🕨 🗀
Pa	rt I	Analysis of Revenue and Expenses (The total	, T	l .			(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	(a) Revenue and expenses per books	(b)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach					
	_	schedule)	250,000	<u> </u>			
	2	Check ► ☐ If the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments	188		188		
	4	Dividends and interest from securities	37,589	<u> </u>	37,589		
	5a	Gross rents	ļ				
e	b	Net rental income or (loss)	_				
Œ	6a	Net gain or (loss) from sale of assets not on line 10					
Revenue	b 7	Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2)	-				
~	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	ь	Less Cost of goods sold					
	C	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	287,777		37,777		
	13	Compensation of officers, directors, trustees, etc Other employee salaries and wages					
w	14 15	Pension plans, employee benefits					
156	16a	Legal fees (attach schedule)					
be	b	Accounting fees (attach schedule)	3,175		1,588		1,587
Operating and Administrative Expenses	c	Other professional fees (attach schedule)	3,938		3,938		·
tive	17	Interest					
štra	18	Taxes (attach schedule) (see instructions)	904		506		
	19	Depreciation (attach schedule) and depletion					
ŧ	20	Occupancy					
ďΑ	21	Travel, conferences, and meetings					
an	22	Printing and publications					
ing	23	Other expenses (attach schedule)					
rat	24	Total operating and administrative expenses.					
о Б]	Add lines 13 through 23	8,017 56,100	1	6,032		1,587 56,100
_	25	Contributions, gifts, grants paid	56,100	-			36,100
	26	Total expenses and disbursements. Add lines 24 and 25	64,117		6,032		57,687
	27	Subtract line 26 from line 12					
	a	Excess of revenue over expenses and disbursements	223,660				
	ь	Net investment income (If negative, enter -0-)			31,745		
	С	Adjusted net income (If negative, enter -0-)					
For	Paper	work Reduction Act Notice, see instructions.			Cat No 11289)	⟨ Foi	rm 990-PF (2018)

		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 ▶			
2	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U S and state government obligations (attach schedule)			
	ь	Investments—corporate stock (attach schedule)	300,000	420,351	
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	246,698	9 246,698	
	14	Land, buildings, and equipment basis ▶			

908,170

908.170

908,170

908,170

1,133,725

1,133,725

1,133,725

1,133,725

2

3

4

5

6

908,170

223,660

1,133,725

1,133,725 Form 990-PF (2018)

1,895

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Accounts payable and accrued expenses

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here

Paid-in or capital surplus, or land, bldg, and equipment fund

Capital stock, trust principal, or current funds

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Analysis of Changes in Net Assets or Fund Balances

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

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

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Other assets (describe > _

Grants payable

Unrestricted

Temporarily restricted

Permanently restricted .

and complete lines 27 through 31.

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

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) -

Deferred revenue .

Other liabilities (describe -

instructions Also, see page 1, item I)

15 16

17

18

19

20

21

22 23

24

25

26

28 29

31

Part III

2

3

Liabilities

Fund Balances

ŏ

Assets 27

Net 30 388,820

190,665

1,046,161

	(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				
b				
С				
d				
е				
	Complete only for assets show	ing gain in column (h) and owned by	the foundation on 12/31/69	(1)
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col(ı) over col(յ), ıf any	Gains (Col (h) gain minus col (k), but not less than -0-) oi Losses (from col (h))
a				
b				
С				
d				
e				
2	Capital gain net income or (ne		n, also enter in Part I, line 7 s), enter -0- in Part I, line 7	} 2
3	Net short-term capital gain or	(loss) as defined in sections 1222(5) and (6)	
	If gain, also enter in Part I, lir in Part I, line 8	ne 8, column (c) (see instructions) I	f (loss), enter -0-	} 3
Par	V Qualification Under	r Section 4940(e) for Reduce	d Tax on Net Investment	Income

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

(a)

Base period years Calendar

year (or tax year beginning in)

2017

2016

2015

2014

2013 2 Total of line 1, column (d)

5 Multiply line 4 by line 3

instructions

Adjusted qualifying distributions

3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the

.

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

number of years the foundation has been in existence if less than 5 years

4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5

6 Enter 1% of net investment income (1% of Part I, line 27b) .

8 Enter qualifying distributions from Part XII, line 4

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

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

81,553

4,000

13,998

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

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

Net value of noncharitable-use assets

729,376

460,299

247,767

246,250

2

3

4

5

6

7

8

(d)

Distribution ratio

(col (b) divided by col (c))

Page 3

(d)

Date sold

(mo, day, yr)

Yes 🗸 No

0 111812

0 008690

0 056497

0 176999

0 059000

907,644

53,551

53,868

57,687

Form 990-PF (2018)

317

Page **6**

Form	990-PF (20	018)								F	age 6
Pai	rt VII-B	Statements Regar	ding	Activities for Which	Form 4720 May Be	Required (continue	d)				
5a	During the	e year did the foundation	pay o	r incur any amount to						Yes	No
	(1) Carry	on propaganda, or other	wise a	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?					· · 🗌 Yes	✓	No				
					Yes	✓	No				
		(4) Provide a grant to an organization other than a charitable, etc., organization described									
		tion 4945(d)(4)(A)? See le for any purpose other				· · L Yes	✓	No			
		tional purposes, or for th			• • • • • • • • • • • • • • • • • • • •						
h		wer is "Yes" to 5a(1)–(5)	•	•		∟ Yes	\checkmark	No			
		ns section 53 4945 or in a		•	• •				5b		
	_	ons relying on a current		• •			· —	Ì			
С		wer is "Yes" to question 5					ш				
		se it maintained expendit			•	· · □ Yes	П	No			
	If "Yes," a	ttach the statement requ	ured b	y Regulations section 53	4945-5(d)	⊔ tes	ш	NO			
6a	Did the fo	undation, during the yea	r, rece	ive any funds, directly or	indirectly, to pay premit	ıms on					
	a persona	l benefit contract?				· 🔲 Yes		N			
ь	Did the fo	undation, during the yea	r, pay	premiums, directly or inc	lirectly, on a personal be	nefit contract?		NO	6 b		No
	If "Yes" to	6b, file Form 8870									
7a	At any tım	ne during the tax year, w	as the	foundation a party to a p	prohibited tax shelter tran	nsaction? Yes	✓	No			
b		the foundation receive a		•		transaction?			7 b		
8		ndation subject to the se									
	excess pa	rachute payment during									
Pai	t VIII	Information About and Contractors	Offic	ers, Directors, Trust	tees, Foundation Ma	ınagers, Highly Pai	d En	nploy	yees,		
1	List all of	ficers, directors, truste		bundation managers ar b) Title, and average	(c) Compensation (If	(d) Contributions t		Ι			
	(a) Na	ame and address	`	hours per week	not paid, enter	employee benefit plans	and			ise acc Ilowano	
				devoted to position	-0-)	deferred compensati			iner ar	ilowani	
	AM ZANT	REET SUITE 208	10 00	IDENT)	0		0				(
	ON CITY, NV										
MARY	ZANT			ETARY	0		0				(
		REET SUITE 208	5 00								
	ON CITY, NV CK COLLINS	09701	DIRE	CTOR	0		0				
		REET SUITE 208	5 00		9		Ū				
CARS	ON CITY, NV	89701									
	Compens	ation of five highest-pa	aid en	nployees (other than t	hose included on line 1			ne, er	nter "	NONE.	•
(a)	Name and a	address of each employee	e paid	(b) Title, and average	() 6	(d) Contributions t employee benefit		(e) i	Expens	se acco	ount,
	m	ore than \$50,000	•	hours per week devoted to position	(c) Compensation	plans and deferred	1	ot	her all	owanc	es
NONI	_			'		compensation					
NON											
Tota	l number o	f other employees paid o	ver \$5	0,000							
											2018

Form 990-PF (2018)		Page 7
Part VIII Information About Officers, Directors, Truste and Contractors (continued)	ees, Foundation Managers, Highly P	aid Employees,
3 Five highest-paid independent contractors for professional s	ervices (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		
Total number of others receiving over \$50,000 for professional services.	<u> </u>	<u> </u>
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Included.	de relevant statistical information such as the numbe	er 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 du	·	Amount
1 N/A		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		•
		Form 990-PF (2018)

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

1a

1b

2

3a 3h

4

5

57,687

57.687

57.370

Form 990-PF (2018)

317

Part XII

1

2

3

4

5

b

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

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

Page 9

45,065

45,065

Form **990-PF** (2018)

rt	XII	Ц	

Distributab

Undistributed Income (see instruct					
ble amount for 2018 from Part XI, line 7					

line 7 2 Undistributed income, if any, as of the end of 2018

(a)

Corpus

(b)

Years prior to 2017

(c)

2017

26.913

12.622

39,535

39,535

26.913

12.622

a Enter amount for 2017 only. **b** Total for prior years

3 Excess distributions carryover, if any, to 2018 a From 2013. **b** From 2014. . . . c From 2015. . . **d** From 2016. . . . 26,913 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

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 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.

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. .

Subtract lines 7 and 8 from line 6a

indicated below:



Enter gros	s amounts unless otherwise indicated	Unrelated bu	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
_	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
е						
_	and contracts from government agencies ership dues and assessments					
	st on savings and temporary cash ments			14	188	
	nds and interest from securities			14	37,589	
	ntal income or (loss) from real estate -financed property	 				
	debt-financed property					
6 Net re	ntal income or (loss) from personal property					
	investment income					
8 Gain o	r (loss) from sales of assets other than					
	come or (loss) from special events					
	profit or (loss) from sales of inventory					
	revenue a					
b						
		1				
е					27 777	
e 12 Subtot	al Add columns (b), (d), and (e).			13	37,777	37.777
e 12 Subtot 13 Total. (See w	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations)			37,777 3	37,777
e L2 Subtof L3 Total. (See w	cal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the soundation of the soundation of the soundation.	lations) ne Accomplish income is report	nment of Exemed in column (e) o	pt Purposes If Part XVI-A contribu	ted importantly to	37,777
e	ral Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which	lations) ne Accomplish income is report	nment of Exemed in column (e) o	pt Purposes If Part XVI-A contribu	ted importantly to	37,777
e	cal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the soundation of the soundation of the soundation.	lations) ne Accomplish income is report	nment of Exemed in column (e) o	pt Purposes If Part XVI-A contribu	ted importantly to	37,777
e	cal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the soundation of the soundation of the soundation.	lations) ne Accomplish income is report	nment of Exemed in column (e) o	pt Purposes If Part XVI-A contribu	ted importantly to	37,777
e	cal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the soundation of the soundation of the soundation.	lations) ne Accomplish income is report	nment of Exemed in column (e) o	pt Purposes If Part XVI-A contribu	ted importantly to	37,777
e	cal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the soundation of the soundation of the soundation.	lations) ne Accomplish income is report	nment of Exemed in column (e) o	pt Purposes If Part XVI-A contribu	ted importantly to	37,777
e	cal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the soundation of the soundation of the soundation.	lations) ne Accomplish income is report	nment of Exemed in column (e) o	pt Purposes If Part XVI-A contribu	ted importantly to	37,777
e	cal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the soundation of the soundation of the soundation.	lations) ne Accomplish income is report	nment of Exemed in column (e) o	pt Purposes If Part XVI-A contribu	ted importantly to	37,777
e	cal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the soundation of the soundation of the soundation.	lations) ne Accomplish income is report	nment of Exemed in column (e) o	pt Purposes If Part XVI-A contribu	ted importantly to	37,777
e	cal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the soundation of the soundation of the soundation.	lations) ne Accomplish income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	37,777
e	cal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the soundation of the soundation of the soundation.	lations) ne Accomplish income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	37,777
e	cal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the soundation of the soundation of the soundation.	lations) ne Accomplish income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	37,777
e	cal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the soundation of the soundation of the soundation.	lations) ne Accomplish income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	37,777
e	cal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the soundation of the soundation of the soundation.	lations) ne Accomplish income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	37,777
e	cal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the soundation of the soundation of the soundation.	lations) ne Accomplish income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	37,777
e	cal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the soundation of the soundation of the soundation.	lations) ne Accomplish income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	37,777
e	cal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the soundation of the soundation of the soundation.	lations) ne Accomplish income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	37,777
e	cal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the soundation of the soundation of the soundation.	lations) ne Accomplish income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	37,777
e	cal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the soundation of the soundation of the soundation.	lations) ne Accomplish income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	37,777
e	cal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the soundation of the soundation of the soundation.	lations) ne Accomplish income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	37,777
e	cal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the soundation of the soundation of the soundation.	lations) ne Accomplish income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	37,777

For	rm 990-PF (20	018)			Pa	ge 13
L	Part XVII	Information Re Exempt Organi	garding Transfers To and Transactions and Relationships With Noncharit zations	able		
1			directly engage in any of the following with any other organization described in section 501 organizations?		Yes	No
а	Transfers fro	om the reporting foun	dation to a noncharitable exempt organization of			
	(1) Cash.			1a(1)		No
	(2) Other a	issets		1a(2)		No
b	Other transa	actions				
	(1) Sales o	f assets to a nonchar	table exempt organization	1b(1)		No
	(2) Purchas	ses of assets from a r	oncharitable exempt organization	1b(2)		No
	(3) Rental	of facilities, equipmer	nt, or other assets	1b(3)		No
	(4) Reimbu	ırsement arrangemen	ts	1b(4)		No
	(5) Loans o	or loan guarantees.		1b(5)		No
	(6) Perform	ance of services or m	embership or fundraising solicitations	1b(6)		No
c	Sharing of fa	acılıtıes, equipment, r	nailing lists, other assets, or paid employees	1c		No
d	of the goods	, other assets, or ser	is "Yes," complete the following schedule. Column (b) should always show the fair market vices given by the reporting foundation. If the foundation received less than fair market valungement, 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 shall	ıng arra	ngemen	ts

(6) Perf	ormance of services or m	nembership or fund	raising solicitations				1b(6)	No
c Sharing	of facilities, equipment, r	mailing lists, other	assets, or paid employees	5			1c	No
of the go	oods, other assets, or ser	vices given by the	the following schedule (reporting foundation If t column (d) the value of t	he foundatioi	n received less th	an fair market va	t value lue	
(a) Line No	(b) Amount involved	(c) Name of noncha	arıtable exempt organization	(d) Desc	cription of transfers,	transactions, and sh	narıng arranger	ments
2a Is the fo	undation directly or indir	lectly affiliated with	, or related to, one or mo	re tav-evem	nt organizations			
	•	•				□vaa	✓ No	
			c)(3)) or in section 527?			. ⊔ Yes	INO	
b If "Yes,"	complete the following s		I (1) T (1 .	.	b l	
	(a) Name of organization	on	(b) Type of organiz	ation	(c) Description of rela	tionship	

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 Sign 2019-10-29 Here Signature of officer or trustee Title Date

Paid

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best May the IRS discuss this return with the preparer shown (see instr)? 🗹 Yes 🗆 No Print/Type preparer's name Preparer's Signature PTIN Date Check if self-P00914537 employed ▶ □ MICHAEL P AMERIO 2019-10-29 **Preparer** Firm's name ▶ LUCAS HORSFALL MURPHY & PINDROH LLP Fırm's EIN ▶95-4659692 **Use Only** Firm's address ▶ 100 E CORSON ST STE 200 Phone no (626) 744-5100 PASADENA, CA 911033841

Form **990-PF** (2018)

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

- ·				
ACLU FOUNDATION OF SOUTHERN CA 1313 WEST EIGHTH STREET LOS ANGELES, CA 90017	NONE	501(C)(3)	EDUCATION	2,000
BOLSA CHICA LAND TRUST	NONE	501(C)(3)	LAND PRESERVATION	6,000

2037111022223, 671 30017				
BOLSA CHICA LAND TRUST 5200 WAREN AVE 108 HUNTINGTON BEACH, CA 92649	NONE	501(C)(3)	LAND PRESERVATION	6,000

5200 WAREN AVE 108 HUNTINGTON BEACH, CA 92649				
CORAZON2001 E 1ST STREET	NONE	501(C)(3)	GENERAL SUPPORT	1,500

HUNTINGTON BEACH, CA 92649				<u> </u>
CORAZON2001 E 1ST STREET	NONE	501(C)(3)	GENERAL SUPPORT	1,500

CORAZON2001 E 1ST STREET SANTA ANA, CA 92705	NONE	501(C)(3)	GENERAL SUPPORT	1,500

Total .

56,100

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

any foundation manager

Name and address (home or business)

,	or substantial contributor			
a Paid during the year				
EGAN SLOUGH COMMUNITY 390 PEDERSON RD	NONE	501(C)(3)	ENVIRONMENTAL PROTECTION	1,400

recipient

KALISPELL, MT 599017853				
HEART OF LOS ANGELES 2701 WILSHIRE BLVD LOS ANGELES, CA 90057	NONE	501(C)(3)	YOUTH PROGRAMS	5,100

HEART OF LOS ANGELES 2701 WILSHIRE BLVD LOS ANGELES, CA 90057	NONE	501(C)(3)	YOUTH PROGRAMS	5,100
HOMEBOY INDUSTRIES 130 W BRUNO ST LOS ANGELES, CA 90012	NONE	501(C)(3)	YOUTH PROGRAMS	7,000

LOS ANGELES, CA 90057				
HOMEBOY INDUSTRIES 130 W BRUNO ST LOS ANGELES, CA 90012	NONE	501(C)(3)	YOUTH PROGRAMS	7,000

LOS ANGLELS, CA 90037				
HOMEBOY INDUSTRIES 130 W BRUNO ST LOS ANGELES, CA 90012	NONE	501(C)(3)	YOUTH PROGRAMS	7,000
Total			▶ 3a	56,100

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

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

a Paid during the year				
INTERNATIONAL RELIEF TEAMS 4560 ALVARADO CANYON ROAD SUITE 1H SAN DIEGO, CA 92120	NAONE	501(C)(3)	YOUTH PROGRAMS	1,500

SUITE 1H SAN DIEGO, CA 92120				
KPCC PUBLIC RADIO 474 S RAYMOND AVE PASADENA, CA 91105	NONE	501(C)(3)	GENERAL SUPPORT	1,000

KPCC PUBLIC RADIO 474 S RAYMOND AVE PASADENA, CA 91105	NONE	501(C)(3)	GENERAL SUPPORT	1,000
LOAVES & FISHES 1351 NORTH C STREET SACRAMENTO, CA 95811	NONE	501(C)(3)	YOUTH PROGRAMS	4,000

474 S RAYMOND AVE PASADENA, CA 91105				
LOAVES & FISHES 1351 NORTH C STREET SACRAMENTO, CA 95811	NONE	501(C)(3)	YOUTH PROGRAMS	4,000

LOAVES & FISHES 1351 NORTH C STREET SACRAMENTO, CA 95811	NONE	501(C)(3)	YOUTH PROGRAMS	4,000
Total			▶ 3a	56,100

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

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

MALDEF634 SOUTH SPRING STREET 11TH FLOOR LOS ANGELES, CA 90014	NONE	501(C)(3)	AID TO THE HANDICAPPED	6,600
THE NATIONAL CENTER ON ADDICTION	NONE	E01(C)(2)	MENTAL HEALTH CRICIC	2 000

·				
THE NATIONAL CENTER ON ADDICTION 633 THIRD AVENUE 19TH FLOOR NEW YORK, NY 10017	NONE	501(C)(3)	MENTAL HEALTH, CRISIS INTERVENTION	2,000
NORTH VALLEY FOOD BANK	NONE	501(C)(3)	FOOD BANK	2 000

19TH FLOOR NEW YORK, NY 10017				
NORTH VALLEY FOOD BANK 251 FLATHEAD AVE WHITEFISH, MT 59937	NONE	501(C)(3)	FOOD BANK	2,000

NEW YORK, NY 10017				
NORTH VALLEY FOOD BANK 251 FLATHEAD AVE WHITEFISH, MT 59937	NONE	501(C)(3)	FOOD BANK	2,000
Total			▶ 3a	56,100

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

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

a Paid during the year				
PLANNED PARENT HOODPO BOX 97166 WASHINGTON, DC 200907166	NONE	501(C)(3)	GENERAL SUPPORT	4,000
SANTA ANA PARISH	NONE	501(C)(3)	GENERAL SUPPORT	1,000

SANTA ANA PARISH 13280 CHAPMAN AVE GARDEN GROVE, CA 92840	NONE	501(C)(3)	GENERAL SUPPORT	1,000
SOUTH OAKLAND SHELTER 18505 W 12 MILE RD	NONE	501(C)(3)	GENERAL SUPPORT	2,000

GARDEN GROVE, CA 92840				
SOUTH OAKLAND SHELTER 18505 W 12 MILE RD LATHRUP VILLAGE, MI 48076	NONE	501(C)(3)	GENERAL SUPPORT	2,000
Total			▶ 3a	56,100

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

recipient

56,100

any foundation manager

or substantial contributor

Name and address (home or business)

LOS ANGELES, CA 900113215

Total .

	or substantial contributor			
a Paid during the year				
SPENCER BECKER MEMORIAL FOUNDATION ADDRESS NEWPORT BEACH, CA 92660	NONE	501(C)(3)	GENERNAL SUPPORT	2,000
STS SIMON & JUDE SCHOOL	NONE	501(C)(3)	GENERAL SUPPORT	2.000

NEWPORT BEACH, CA 92660				
STS SIMON & JUDE SCHOOL 20444 MAGNOLIA ST HUNTINGTON BEACH, CA 92646	NONE	501(C)(3)	GENERAL SUPPORT	2,

	STS SIMON & JUDE SCHOOL 20444 MAGNOLIA ST HUNTINGTON BEACH, CA 92646	NONE	501(C)(3)	GENERAL SUPPORT	2,0
П					

STS SIMON & JUDE SCHOOL	NONE	501(C)(3)	GENERAL SUPPORT	2,000
20444 MAGNOLIA ST				
HUNTINGTON BEACH, CA 92646				

STS SIMON & JUDE SCHOOL	NONE	[501(C)(3)	GENERAL SUPPORT	2,000
20444 MAGNOLIA ST				
HUNTINGTON BEACH, CA 92646				

20444 MAGNOLIA ST HUNTINGTON BEACH, CA 92646		
		<u> </u>

HUNTINGTON BEACH, CA 92646				
VISION OF HOPE1339 E 42ND ST	NONE	501(C)(3)	MINISTRY	2.50

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager

recipient

Name and address (home or business)	or substantial contributor			
a Paid during the year				
WAYFINDERS	NONE	501(C)(3)	SPECIAL EDUCATION	2,500

AYFINDERS	NONE	501(C)(3)	SPECIAL EDUCATION
300 ANGELES VISTA BLVD			
DS ANGELES, CA 90043			

Total			▶ 3a	56,100
5300 ANGELES VISTA BLVD LOS ANGELES, CA 90043				İ
WAYFINDERS	NONE	501(C)(3)	SPECIAL EDUCATION	

efile GRAPHIC print - DO NOT	PROCESS	As Filed D	ata -		DLN: 93491310010679	
TY 2018 Accounting Fees Schedule						
	Name:	ZIP FOUN	NDATION			
EIN: 47-2460579						
Category	Amo	ount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
INDIRECT ACCOUNTING FEES		3,175	1,588		1,587	

efile GRAPHIC print - DO NOT PROCESS As Filed Data -	DLN: 93491310010679
TY 2018 Investments Corporate Stock Schedule	
Name: ZIP FOUNDATION	
FTN: 47-2460579	

EIN: 47-24003/9		
Investments Corporation Stock Schedule		
Name of Stock	End of Year Book Value	End of Year Fair Market Value
FIRST REP BK SAN FRANCISCO CA NEW	300,000	260,880
BROADCOM INC. COM	40,404	40,685
MERCURY	40,026	45,763
ROCHE HLDGS LTD SPONSORED ADR	39,921	41,492

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491310010679
TY 2018 Investments - Other S	Schedule	
Name: 7	ZIP FOUNDATION	
FTN: /	47- <i>24</i> 60579	

LIN. 47 2400373					
Investments Other Schedule 2					
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value		
NEUBERGER BERMAN MKP INCOME FD INC C	AT COST	246,698	190,665		

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DL	N: 93491310010679			
TY 2018 Other Professional Fees Schedule							
Name: ZIP FOUNDATION							
E	EIN: 47-2460579						
Category	Amount	Net Investment	Adjusted Net	Disbursements			
Category	Amount	Income	Income	for Charitable			
				Purposes			

3,938

3,938

ADVISORY FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLI	N: 93491310010679			
TY 2018 Taxes Schedule							
Name: ZIP FOUNDATION							
EIN: 47-2460579							
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
Category FEDERAL EXCISE TAX - PY	Amount		_	for Charitable			

efile GRAPHIC print - DC	NOT PROCESS As Filed Data -		DLN: 93491310010679		
Schedule B	Schedule of Contributors		OMB No 1545-0047		
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, ► Go to <u>www ırs gov/Form990</u> for the I		2018		
Name of the organizatio ZIP FOUNDATION		Employer	identification number		
Organization type (chec	one)	47-246057	79		
Filers of:	Section:				
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization				
	4947(a)(1) nonexempt charitable trust not trea	4947(a)(1) nonexempt charitable trust not treated as a private foundation			
	☐ 527 political organization	☐ 527 political organization			
Form 990-PF	✓ 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated	4947(a)(1) nonexempt charitable trust treated as a private foundation			
	501(c)(3) taxable private foundation				
	on filing Form 990, 990-EZ, or 990-PF that received, d roperty) from any one contributor Complete Parts I an				
Special Rules					
under sections 50 received from any	n described in section 501(c)(3) filing Form 990 or 990- 9(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (one contributor, during the year, total contributions of t 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II	(Form 990 or 990-EZ), Part II, line 1 the greater of (1) \$5,000 or (2) 2% o	3, 16a, or 16b, and that		
during the year, to	n described in section 501(c)(7), (8), or (10) filing Form al contributions of more than \$1,000 exclusively for rel e prevention of cruelty to children or animals. Complete	ligious, charitable, scientific, literary			
during the year, co If this box is check purpose Don't co	n described in section 501(c)(7), (8), or (10) filing Form ntributions <i>exclusively</i> for religious, charitable, etc., pued, enter here the total contributions that were received inplete any of the parts unless the General Rule applies, etc., contributions totaling \$5,000 or more during the	irposes, but no such contributions to d during the year for an exclusively es to this organization because it rec	otaled more than \$1,000 religious, charitable, etc , ceived <i>nonexclusively</i>		
990-EZ, or 990-PF), but if	that isn't covered by the General Rule and/or the Spec must answer "No" on Part IV, line 2, of its Form 990, o m 990PF, Part I, line 2, to certify that it doesn't meet th	or check the box on line H of its			
For Paperwork Reduction Actor Form 990, 990-EZ, or 990-		13X Schedule B (Form 9	990, 990-EZ, or 990-PF) (2018)		

Name of organization

Employer identification number

ZIP FOUNDATION		47-2460579	
Part I	Contributors (See instructions) Use duplicate copies of Part I if add	itional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	WILLIAM ZANT 318 N CARSON STREET SUITE 208 CARSON CITY, NV 89701	\$ 250,000	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) N o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-			Person

Schedule B (Form 99	0, 990-EZ, or 990-PF) (2018)		Page 3
Name of organization ZIP FOUNDATION		Employer identification number	
		47-24	60579
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
		\$	
L		Schedule B (Form 9	990, 990-EZ, or 990-PF) (2018)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)