

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.**

OMB No 1545-0052
2018
Open to Public Inspection

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

Name of foundation NATALIE ORFALEA FOUNDATION		A Employer identification number 47-4602133	
Number and street (or P O box number if mail is not delivered to street address) PO BOX 50736		B Telephone number (see instructions) (805) 331-1309	
City or town, state or province, country, and ZIP or foreign postal code SANTA BARBARA, CA 93150		C If exemption application is pending, check here <input type="checkbox"/>	
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		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ <u>14,708,805</u>		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)			

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received (attach schedule)	708,250			
2	Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
3	Interest on savings and temporary cash investments	102,608	102,608		
4	Dividends and interest from securities	187,570	187,570		
5a	Gross rents				
b	Net rental income or (loss) -49,826				
6a	Net gain or (loss) from sale of assets not on line 10	832,814			
b	Gross sales price for all assets on line 6a 2,506,476				
7	Capital gain net income (from Part IV, line 2)		832,814		
8	Net short-term capital gain				
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)	65,359	20,685		
12	Total. Add lines 1 through 11	1,896,601	1,143,677		
13	Compensation of officers, directors, trustees, etc	0	0		0
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
16a	Legal fees (attach schedule)	522	0		0
b	Accounting fees (attach schedule)	4,310	2,155		0
c	Other professional fees (attach schedule)	120,778	55,309		31,020
17	Interest				
18	Taxes (attach schedule) (see instructions)	130	0		0
19	Depreciation (attach schedule) and depletion				
20	Occupancy				
21	Travel, conferences, and meetings	6,918	0		0
22	Printing and publications	828	0		0
23	Other expenses (attach schedule)	101,828	49,826		0
24	Total operating and administrative expenses. Add lines 13 through 23	235,314	107,290		31,020
25	Contributions, gifts, grants paid	975,649			295,649
26	Total expenses and disbursements. Add lines 24 and 25	1,210,963	107,290		326,669
27	Subtract line 26 from line 12				
a	Excess of revenue over expenses and disbursements	685,638			
b	Net investment income (if negative, enter -0-)		1,036,387		
c	Adjusted net income (if negative, enter -0-)				

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	27,760	24,770	24,770
	2 Savings and temporary cash investments	518,043	2,265,876	2,265,876
	3 Accounts receivable ▶ <u>750</u>			
	Less allowance for doubtful accounts ▶ _____		750	750
	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	383		
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	8,544,629	8,455,956	8,455,956
	c Investments—corporate bonds (attach schedule)	3,247,481	3,561,614	3,561,614
	11 Investments—land, buildings, and equipment basis ▶ _____			
Less accumulated depreciation (attach schedule) ▶ _____				
12 Investments—mortgage loans				
13 Investments—other (attach schedule)	1,619,090	399,839	399,839	
14 Land, buildings, and equipment basis ▶ _____				
Less accumulated depreciation (attach schedule) ▶ _____				
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	13,957,386	14,708,805	14,708,805	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable	350,466	780,000	
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)	0	4,073	
	23 Total liabilities (add lines 17 through 22)	350,466	784,073	
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	13,606,920	13,924,732	
	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)	13,606,920	13,924,732		
31 Total liabilities and net assets/fund balances (see instructions) .	13,957,386	14,708,805		

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	13,606,920
2 Enter amount from Part I, line 27a	2	685,638
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3	4	14,292,558
5 Decreases not included in line 2 (itemize) ▶ _____	5	367,826
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	13,924,732

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 2000 SHARES OF AUTOMATIC DATA PROCESSING	P	2015-07-22	2018-12-24
b 3000 SHARES OF BROADRIDGE FINANCIAL SOLUTIONS INC	P	2010-06-28	2018-12-24
c 5000 SHARES OF MOLSON COORS BREWING	P	2015-07-22	2018-12-24
d 125000 PAR VALUE KRAFT FOODS GROUP INC	P	2015-07-22	2018-03-21
e SALE OF 1283 CVC LLC	P	2015-07-22	2018-12-31

(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 259,997		70,779	189,218
b 285,927		58,591	227,336
c 287,443		195,473	91,970
d 130,030		133,006	-2,976
e 1,543,079		1,215,813	327,266

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			189,218
b			227,336
c			91,970
d			-2,976
e			327,266

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	832,814
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	}		3	

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see instructions before making any entries			
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017			
2016			
2015			
2014			
2013			
2 Total of line 1, column (d)			2
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
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5			4
5 Multiply line 4 by line 3			5
6 Enter 1% of net investment income (1% of Part I, line 27b)			6
7 Add lines 5 and 6			7
8 Enter qualifying distributions from Part XII, line 4			8

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)

Table with 11 rows for excise tax calculations. Includes fields for exempt foundations, domestic foundations, tax under section 511, subtitle A tax, and total tax due/overpayment. Includes sub-table for 2018 estimated tax payments (6a-6d).

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Columns include question text, 'Yes', and 'No' checkboxes. Questions cover political campaign influence, political expenditures, unrelated business income, and state reporting requirements.

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-14 regarding controlled entities, distributions, public inspection requirements, and books in care.

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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. 15

Table with 3 columns: Question, Yes, No. Row 16 regarding interest in foreign countries.

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.

Main table with 3 columns: Question, Yes, No. Rows 1a-4b regarding Form 4720 exceptions and requirements.

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

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ▶	0

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	13,695,016
b	Average of monthly cash balances.	1b	880,937
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	14,575,953
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	14,575,953
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	218,639
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	14,357,314
6	Minimum investment return. Enter 5% of line 5.	6	717,866

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

1	Minimum investment return from Part X, line 6.	1	717,866
2a	Tax on investment income for 2018 from Part VI, line 5.	2a	20,728
b	Income tax for 2018 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	20,728
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	697,138
4	Recoveries of amounts treated as qualifying distributions.	4	9,674
5	Add lines 3 and 4.	5	706,812
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	706,812

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	326,669
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	326,669
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	326,669

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				706,812
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only.			0	
b Total for prior years 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2018				
a From 2013.	1,985,022			
b From 2014.	217,592			
c From 2015.				
d From 2016.				
e From 2017.				
f Total of lines 3a through e.	2,202,614			
4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ 326,669				
a Applied to 2017, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2018 distributable amount.				326,669
e Remaining amount distributed out of corpus				0
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	380,143			380,143
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,822,471			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions).	1,604,879			
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	217,592			
10 Analysis of line 9				
a Excess from 2014.	217,592			
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. ▶

b Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
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

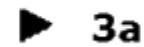
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

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

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

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i>				
AUDACIOUS FOUNDATION PO BOX 91340 SANTA BARBARA, CA 93190	NONE	501(C)(3)	LOUD PROGRAM FISCAL AGENT	100,000
SANTA BARBARA FOUNDATION 1111 CHAPALA STREET 200 SANTA BARBARA, CA 93101	NONE	501(C)(3)	VARIOUS PUBLIC CHARITIES IN COMMUNITY FOR GENERAL SUPPORT	50,000
GLOBAL HEALTH CORPS ONE PENN PLAZA SUITE 6271 NEW YORK, NY 10018	NONE	501(C)(3)	UNITED STATES FELLOWSHIP	30,466
Total				295,649



3a

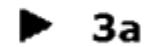
Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AHA1209 DE LA VINA SUITE A SANTA BARBARA, CA 93101	NONE	501(C)(3)	SOCIAL-EMOTIONAL LEARNING IN-SCHOOL	10,000
BUDDHIST FILM FOUNDATION PO BOX 22755 OAKLAND, CA 94609	NONE	501(C)(3)	THE TALE'S OUTREACH & IMPACT CAMPAIGN	10,000
DOCTORS WITHOUT WALLS 19 E MICHELTORENA ST SANTA BARBARA, CA 93101	NONE	501(C)(3)	ELECTRONIC MEDICAL RECORD SUPPORT	16,500
Total				295,649

▶ 3a

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i>				
FAMILY THERAPY GROUP 111 E ARRELLAGA ST SANTA BARBARA, CA 93101	NONE	501(C)(3)	SHARED CROSSING TESTIMONIAL PROJECT	10,000
MILITARY BEHAVIORAL HEALTH INITIATIVE 68 JAY ST STE 605A BROOKLYN, NY 11201	NONE	501(C)(3)	FISCAL AGENT FOR GENDER IN HOLLYWOOD DOCUMENTARY FILM PROJECT	50,000
EVERYDAY HERO65 FAIRCHILD ST CHARLESTON, SC 29492	NONE	NC	HEART KIDS OF NEW ZELAND	533
Total				295,649



3a

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
INTERFAITH INITIATIVE 1000 SAN ANTONIO CREEK RD SANTA BARBARA, CA 93111	NONE	501(C)(3)	SHOWERS OF BLESSINGS MUSIC EDUCATION	15,000
PEACE CORPS1111 20TH STREET NW WASHINGTON, DC 20526	NONE	501(C)(3)	EBENEZER KINDY PROJECT	2,000
PRISON YOGA OF SANTA BARBARA 315 MEIGS ROAD SUITE A144 SANTA BARBARA, CA 93109	NONE	501(C)(3)	GENERAL OPERATING SUPPORT	1,150
Total				295,649

▶ **3a**

TY 2018 Accounting Fees Schedule**Name:** NATALIE ORFALEA FOUNDATION**EIN:** 47-4602133

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	4,310	2,155		0

TY 2018 Investments Corporate Bonds Schedule**Name:** NATALIE ORFALEA FOUNDATION**EIN:** 47-4602133**Investments Corporate Bonds Schedule**

Name of Bond	End of Year Book Value	End of Year Fair Market Value
CORPORATE BONDS	3,561,614	3,561,614

TY 2018 Investments Corporate Stock Schedule**Name:** NATALIE ORFALEA FOUNDATION**EIN:** 47-4602133

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
CORPORATE STOCKS	8,455,956	8,455,956

TY 2018 Investments - Other Schedule**Name:** NATALIE ORFALEA FOUNDATION**EIN:** 47-4602133**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
1601 STATE STREET HOTEL INVESTORS, LP	FMV	123,294	123,294
COURSEBASE, LLC	FMV	149,743	149,743
IMPACT PARTNERS FILM INVESTMENTS	FMV	126,802	126,802

TY 2018 Legal Fees Schedule**Name:** NATALIE ORFALEA FOUNDATION**EIN:** 47-4602133

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	522	0		0

TY 2018 Other Decreases Schedule**Name:** NATALIE ORFALEA FOUNDATION**EIN:** 47-4602133

Description	Amount
UNREALIZED LOSS ON INVESTMENTS	367,826

TY 2018 Other Expenses Schedule**Name:** NATALIE ORFALEA FOUNDATION**EIN:** 47-4602133**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
IMPACT PARTNERS DUES	37,841	0		0
OFFICE EXPENSES AND SUPPLIES	2,573	0		0
INSURANCE	5,573	0		0
COMPUTERS AND INTERNET	6,015	0		0
K-1 FROM 1283 CVC, LLC	49,826	49,826		0

TY 2018 Other Income Schedule**Name:** NATALIE ORFALEA FOUNDATION**EIN:** 47-4602133**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
EAGLE HUNTRESS, LLC	-548	-548	-548
1601 STATE STREET HOTEL INVESTORS, LP	9,806	9,806	9,806
OTHER	11,427	11,427	11,427
RETURNED GRANTS	44,674		44,674

TY 2018 Other Liabilities Schedule**Name:** NATALIE ORFALEA FOUNDATION**EIN:** 47-4602133

Description	Beginning of Year - Book Value	End of Year - Book Value
CREDIT CARDS	0	4,073

TY 2018 Other Professional Fees Schedule**Name:** NATALIE ORFALEA FOUNDATION**EIN:** 47-4602133

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MANAGEMENT FEES	55,309	55,309		0
CONSULTANTS	65,469	0		31,020

TY 2018 Taxes Schedule**Name:** NATALIE ORFALEA FOUNDATION**EIN:** 47-4602133

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CA ATTORNEY GENERAL FEE	95	0		0
CA FRANCHISE TAX BOARD FEE	10	0		0
DELAWARE CORPORATION FEES	25	0		0

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

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

OMB No 1545-0047
2018

Name of the organization
NATALIE ORFALEA FOUNDATION

Employer identification number
47-4602133

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 NATALIE ORFALEA FOUNDATION	Employer identification number 47-4602133
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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	NATALIE F ORFALEA PO BOX 50736	\$ 480,000	Person <input checked="" type="checkbox"/>
	SANTA BARBARA, CA 93150		Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
2	LOUIS BUGLIOLI 6508 EAST FOWLER AVENUE	\$ 228,250	Person <input checked="" type="checkbox"/>
	TAMPA, FL 33617		Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)

Name of organization NATALIE ORFALEA FOUNDATION	Employer identification number 47-4602133
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Part II Noncash Property			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	(See instructions) Use duplicate copies of Part II if additional space is needed _____ _____ _____	_____ \$ _____	_____
	_____ _____ _____	_____ \$ _____	_____
	_____ _____ _____	_____ \$ _____	_____
	_____ _____ _____	_____ \$ _____	_____
	_____ _____ _____	_____ \$ _____	_____
	_____ _____ _____	_____ \$ _____	_____
	_____ _____ _____	_____ \$ _____	_____
	_____ _____ _____	_____ \$ _____	_____
	_____ _____ _____	_____ \$ _____	_____
	_____ _____ _____	_____ \$ _____	_____
	_____ _____ _____	_____ \$ _____	_____

Name of organization NATALIE ORFALEA FOUNDATION	Employer identification number 47-4602133
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Part III *Exclusively* religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ _____
 Use duplicate copies of Part III if additional space is needed

(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
_____	_____
_____	_____