Form 990-PF

Department of the Treasury

Internal Revenue Service

2018

DLN: 93491074005099 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

		ndar year 2018, or tax year	r beginning 01-01-20	)18 , ar	nd en	ding 12-31-		
		indation NDATION					entification numbe	r
						80-0075857		
		l street (or P O box number if mail is n ANDWICK CIRCLE	ot delivered to street address)	Room/suite		<b>B</b> Telephone nu (909) 208-5655	mber (see instructior	ns)
		, state or province, country, and ZIP of A 92882	r foreign postal code	1		<b>C</b> If exemption	application is pending	g, check here
G Ch	neck al	I that apply	☐ Initial return of a☐ Amended return	former public charity		<b>2</b> Foreign or	ganizations, check he ganizations meeting k here and attach cor	the 85%
H Ch	eck tv		501(c)(3) exempt private	foundation			indation status was t	
		4947(a)(1) nonexempt charitabl		e private foundation		under section	n 507(b)(1)(A), chec	Killere - —
of '	year (f	xet value of all assets at end rom Part II, col (c), ▶\$ 0	Accounting method  Other (specify)  (Part I, column (d) must	☐ Cash ☑ Accru	al		tion is in a 60-month n 507(b)(1)(B), checi	
Pa	rt I	Analysis of Revenue and of amounts in columns (b), (c), and equal the amounts in column (a) (se	(d) may not necessarily	(a) Revenue and expenses per books	(ь)	Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes
	1	Contributions, gifts, grants, etc.,						(cash basis only)
	_	schedule) Check ▶ ☑ If the foundation is						
	2	Sch B						
	3	Interest on savings and tempora	•	70.446		70.146	70.446	
	4	Dividends and interest from secu Gross rents	urities	78,146		78,146	78,146	
	5a b	Net rental income or (loss)						
Reversie	6a	Net gain or (loss) from sale of as	ssets not on line 10	-28,355				
	b	Gross sales price for all assets o						
	_	Camital many material same (forms De	668,651					
	7 8	Capital gain net income (from Pa Net short-term capital gain .	,				7,029	
	9	Income modifications					7,029	
	10a	Gross sales less returns and allo	wances					
	ь	Less Cost of goods sold						
	С	Gross profit or (loss) (attach sch	edule)					
	11	Other income (attach schedule)		100,668				
	12	Total. Add lines 1 through 11		150,459		78,146	85,175	
	13	Compensation of officers, directo	ors, trustees, etc	50,000		50,000		
	14	Other employee salaries and wa	ges					
95	15	Pension plans, employee benefit	s					
Š	16a	Legal fees (attach schedule) .						
Expenses	b	Accounting fees (attach schedule	e)	5,200		5,200		
	С	Other professional fees (attach s	schedule)	<b>9</b> 44,352		44,352		
Administrative	17	Interest						
stra	18	Taxes (attach schedule) (see ins	tructions)	<b>%</b> J 85		85		
Ξ	19	Depreciation (attach schedule) a	and depletion					
Ę	20	Occupancy						
Ρ	21	Travel, conferences, and meeting						
a	22	Printing and publications						
Operating and	23	Other expenses (attach schedule						
rat	24	Total operating and administ	•					
<u>8</u>		Add lines 13 through 23		99,637		99,637		0
_	25	Contributions, gifts, grants paid		175,000				175,000
	26	Total expenses and disburser 25	ments. Add lines 24 and	274,637		99,637		175,000
	27	Subtract line 26 from line 12						
	а	Excess of revenue over experdisbursements	nses and	-124,178				
	b	Net investment income (if neg	gative, enter -0-)	121,170		0		
	С	Adjusted net income (if negat	ıve, enter -0-)			-	85,175	

	2	Savings and temporary cash investments			
	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			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	2,876,587	2,215,746	
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			

## 13 540,334 831,993 Investments—other (attach schedule)

2

3

4

Enter amount from Part I, line 27a

Add lines 1, 2, and 3 . . . . . .

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize)

		,	1	, <u> </u>	
	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			
		ınstructions Also, see page 1, item I)	3,559,665	3,284,394	
	17	Accounts payable and accrued expenses			
	18	Grants payable			
sər	19	Deferred revenue			
Ĭ	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe			
	23	Total liabilities(add lines 17 through 22)		0	
		Foundations that follow SFAS 117, check here			
ses		and complete lines 24 through 26 and lines 30 and 31.			
an	24	Unrestricted			
Balance	25	Temporarily restricted			
	26	Permanently restricted			
Fund		Foundations that do not follow SFAS 117, check here 🕨 🗹			
or		and complete lines 27 through 31.			
sts	27	Capital stock, trust principal, or current funds	3,559,665	3,284,394	
ssets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
⋖	29	Retained earnings, accumulated income, endowment, or other funds			1
Net	30	Total net assets or fund balances (see instructions)	3,559,665	3,284,394	
	ı				

3,284,394 30 Total net assets or fund balances (see instructions) . 3,559,665 Total liabilities and net assets/fund balances (see instructions) . 3,559,665 3,284,394 31 Part III

**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 endof-year figure reported on prior year's return) 3,559,665 1

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

2

3 4

5

-124,178

3,435,487

151,093

3,284,394 Form **990-PF** (2018)

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	the kind(s) of property sold (e g , ehouse, or common stock, 200 sh		(b) How acquire P—Purchase D—Donatior	· / m	(c) te acquired o , day, yr )	<b>(d)</b> Date sold (mo , day, yr )
1 a ASSETMARK COVERED ST			Р	2	018-01-01	2018-01-01
<b>b</b> ASSETMARK COVERED LT			Р	21	000-01-01	2018-01-01
c COLONY CREDIT REAL EST	ГАТЕ		Р	2	012-11-27	2018-02-12
<b>d</b> Capital Gain Dividends						
e						
<b>(e)</b> Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale		Gain o	h) r (loss) ) minus (g)
a 107	,958		100,	929	, , , , ,	7,029
<b>b</b> 518	,454		555,	069		-36,615
<b>c</b> 32	,992		41,	008		-8,016
d			·			9,247
e						,
	showing gain in column (h) and ow	vned 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	Excess	( <b>k)</b> of col (ı) (j), ıf any	co	Gains (Col( l (k), but not	l) h) gain minus less than -0-) <b>or</b> om col (h))
a						7,029
b						-36,615
С						-8,016
d						
e						
· -	or (net capital loss)  In or (loss) as defined in sections  I, line 8, column (c) (see instruct			} 2		-28,355 7,029
	nder Section 4940(e) for Rovate foundations subject to the se				•	
f section 4940(d)(2) applies, lea	ve this part blank section 4942 tax on the distributa	this amount of any year	in the base per	uod?	□ Y	es 🗆 No
f "Yes," the foundation does not	qualify under section 4940(e) Do punt in each column for each year,	not complete this part	·•		<u></u> —	
(a)	,	1	I I I I I I I I I I I I I I I I I I I	tiles	(d)	
Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	(col	Distribution rati (b) divided by c	
2017						
2016						
2015						
2014						
2013						
			<u> </u>	2		
number of years the found 4 Enter the net value of none	or the 5-year base period—divide ation has been in existence if less charitable-use assets for 2018 fror	than 5 years n Part X, line 5	· · · ·	3 4		
				5		
	nt income (1% of Part I, line 27b)		$\cdots$	6		
<b>7</b> Add lines 5 and 6			$\cdot$ $\cdot$ $\cdot$ $\vdash$	7		
	ns from Part XII, line 4 , ter than line 7, check the box in P			<b>8</b>   using a 1º	% tax rate Se	e the Part VI

Page **6** 

Pai	Statements Regard	ding	Activities for Which	Form 4720 May Be	Required (continued)	)			
5a	During the year did the foundation	pay o	r incur any amount to					Yes	No
	(1) Carry on propaganda, or other	vise a	ttempt to influence legisl	ation (section 4945(e))?	☐ Yes 5	✓ No			
	(2) Influence the outcome of any s	pecıfı	c public election (see sect	ion 4955), or to carry					
	on, directly or indirectly, any vo	oter re	egistration drive?		· · 🗌 Yes	✓ No			
	(3) Provide a grant to an individua				☐ Yes 5	✓ No			
	(4) Provide a grant to an organizat			· -					
	in section 4945(d)(4)(A)? See i				· · Yes	✓ No			
	(5) Provide for any purpose other t								
	educational purposes, or for the		· ·		∟ Yes Ľ	✓ No			
b	If any answer is "Yes" to 5a(1)-(5)		=						
	Regulations section 53 4945 or in a				_	-	5b		No
_	Organizations relying on a current i								
С	If the answer is "Yes" to question 5			•					
	tax because it maintained expendit				· · L Yes	<b>✓</b> No			
_	If "Yes," attach the statement requ		· -						
6a	Did the foundation, during the year	-			ums on				
L	a personal benefit contract?				· Yes	✓ No	6		l NI
D	Did the foundation, during the year If "Yes" to 6b, file Form 8870	, pay	premiums, directly or ind	irectiy, on a personal be	nerit contract/		6b		No
7-	At any time during the tax year, wa	c tha	foundation a party to a n	robibited tay chalter train	ncaction? $\Box$	_			
7a b	If yes, did the foundation receive a				⊥ res ⊔	✓ No	7b		No
8	Is the foundation subject to the sec						<del>                                     </del>		<b>-</b> ''
0	excess parachute payment during t					<u> </u>			
					res_L			<u> </u>	
Pai	and Contractors	JIIIC	ers, Directors, Trust	ees, roundation Ma	anagers, Highly Paid	Emplo	уссь,	•	
1	List all officers, directors, truste			•					
	(a) Name and address	(	<b>b)</b> Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans a deferred compensation	nal , ;	Experother a		
See /	Additional Data Table								
_2_	Compensation of five highest-pa	id er	nployees (other than th	nose included on line :	1-see instructions). If i	none, e	nter "	NONE	<u>."                                    </u>
(a)	Name and address of each employee more than \$50,000	paid	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred		Expen ther all		
			devoted to position		compensation				
NON	E								
Tota	I number of other employees paid or	er \$5	0,000		<u> </u>				
						Fo	rm <b>99</b> 1	0-PF	(201

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Part VIII Information About Officers, Directors, Trustees, Foundary and Contractors (continued)	oundation Managers, Highly Pa	aid Employees,
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		•
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year Include releva organizations and other beneficiaries served, conferences convened, research papers produce:		r of Expenses
1		
2		
3		
<u> </u>		
4		
Part IX-B Summary of Program-Related Investments (see ins	tructions)	
Describe the two largest program-related investments made by the foundation during the	ax year on lines 1 and 2	Amount
1		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		<b>•</b>
Iotal. Add lines 1 through 3		Form <b>990-PF</b> (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

3a 3h

4

5

175.000

175,000

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

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

Amounts set aside for specific charitable projects that satisfy the

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

3

4

5

2018

Page 9

161,756

161,756

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_	_	_	•	<u>'</u>	١,	_	_
ł		1	7	Ħ	ī		Г
ı.	٠	ż		ч	Ц		ı

**b** Total for prior years

d From 2016. . . .

a From 2013. . . . .

e From 2017. . . . .

**b** From 2014. . . . c From 2015. .

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. . . . . .

Excess distributions carryover, if any, to 2018

f Total of lines 3a through e. . . . . . . .

**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 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) . . .

Subtract lines 7 and 8 from line 6a . . . . . .

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . .

d Excess from 2017. . .

e Excess from 2018. .

**b** Excess from 2015. . c Excess from 2016. . .

6 Enter the net total of each column as

indicated below:

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 

14,256

5 709

5,078

5,709

5.078

13.244

(a)

Corpus

25.043

13.244

38,287

14.256

24,031

(b)

Years prior to 2017

(c)

2017

Form 990-PF (20	018)	
Part XIII	Undistributed Income (see instructions)	)

- Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

- Check here lacktriangle ldot if the foundation only makes contributions to preselected charitable organizations and does not accept
- other conditions, complete items 2a, b, c, and d See instructions a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed CHIRAG AMIN MD

unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under

3166 SHANDWICK CIRCLE CORONA, CA 92882 (909) 208-5655

b The form in which applications should be submitted and information and materials they should include

- PLEASE SEE ATTACHED GRANT GUIDELINES Any submission deadlines
  - PLEASE SEE ATTACHED GRANT GUIDELINES
- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors
- PLEASE SEE ATTACHED GRANT GUIDELINES



Enter gro	oss amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by section	(e) Related or exempt	
_	am service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions )
	_					
g Fee 2 Mem 3 Inter	bership dues and assessments					
	ends and interest from securities			14	78,146	
	rental income or (loss) from real estate				·	
	ot-financed property					
	debt-financed property					
	r investment income			18	100,668	
8 Gain inver	or (loss) from sales of assets other than					
	ntory			18	-28,355	
	s profit or (loss) from sales of inventory					
	r revenue a					
	otal Add columns (b), (d), and (e)				150,459	
	II. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcu			13	3	150,459
	VI-B Relationship of Activities to th		nment of Exen	npt Purposes		
Line No ▼	Explain below how each activity for which the accomplishment of the foundation's expressions (instructions)					
178	THE ORGANIZATION INVESTS ITS FUNDS TO HOUSING AND RELATED EXPENSES. THE FOR PROVIDE SOCIAL AND EDUCATIONAL ASSIST	UNDATION ALSO	SEEKS TO ASSI	ST RECOGNIZED CHA	RITABLE ORGANIZ	ATIONS WHICH
	<u> </u>					rm <b>990-PF</b> (2018)

11 (20	10,																	
VII			arding ations	g Transfers	Тоа	and	I T	ransaction	san	nd Relation	nsl	nip	s V	Vitl	n Non	charit	able	

	I L VATT	Exempt Organia	zations							
		ganization directly or in than section 501(c)(3)	dırectly engage ın					on 501	Yes	No
аΤ	ransfers	from the reporting foun	dation to a nonch	arıtable ex	empt organization	of				
(	<b>1)</b> Cash							. 1a(1)		No
•	•	rassets						. 1a(2)		No
<b>b</b> C	ther tran	nsactions								
-	-	s of assets to a nonchari						. 1b(1)		No
	•	hases of assets from a n						1b(2)		No
	-	al of facilities, equipmer	•					1b(3)		No
		bursement arrangemen						. 1b(4)		No
•	-	s or loan guarantees. rmance of services or m						. 1b(5)		No
								. 10(6)		No No
	-	f facilities, equipment, n wer to any of the above	-	-						NO
0	f the god	ods, other assets, or ser nsaction or sharing arra (b) Amount involved	vices given by the	reporting column (c	foundation If the f  d) the value of the	foundation receiv goods, other ass	ed less than fair mark	ket value ved	ngemen	ıts
d	escribed	ndation directly or indire in section 501(c) (other complete the following so (a) Name of organization	than section 501 chedule	(c)(3)) or	•		_			
				,			, , , ,			
				1						
				1						
	of n	ler penalties of perjury, ny knowledge and belief ch preparer has any kno	, it is true, correc							
Sig Hei		*****			2019-03-15	*****		May the IRS di return with the prepai below		
		Signature of officer or to	rustee		Date	Title		(see instr )?	<b>✓</b> Yes	□ <sub>No</sub>
		Print/Type preparer's	name Prep	oarer's Sigi	nature	Date	Check if self- employed ▶ ✓	PTIN P00002	2591	
Pai Dro	d parer	RANDY BARMACHE					2p.0700 P L			
	e Only	i ii iii o ii aii ie r	MACHE AND ALFO	RD LLP			F	Firm's EIN ▶27	-08149	927
•	- <b>-</b> y		35 E THOUSAND	OAKS BLVI	D STE 232					
		We	estlake Village, CA	9136236	533		F	Phone no (805	371-7	7898

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation CHIRAG AMIN Trustee 50,000 8 00 3166 SHANDWICK CIRCLE CORONA, CA 92882 KELLY AMIN Trustee 0.50 29407 PINELEAF ST MENIFEE, CA 92584 JOSEPH HAMMOND Trustee 0.50 PO BOX 470 CLEMSON, SC 29633 DEREK MURO Trustee 0 50 5511 MARTINGALE WAY FONTANA, CA 92336 DAVID EVANS Trustee 0.50 9383 COCA RD

ALTA LOMA, CA 91737

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

HARVEST CHRISTIAN FELLOWSHIP 6115 ARLINGTON AVE RIVERSIDE, CA 92504	SUPPORTED ORG	PC	FOR FELLOWSHIP	20,000
HARVEST BIBLE CHAPEL 800 ROHLWING RD	SUPPORTED ORG	PC	FOR FELLOWSHIP	25,000

MIVERSIDE, CA SESSA				
HARVEST BIBLE CHAPEL 800 ROHLWING RD ROLLING MEADOWS, IL 60008	SUPPORTED ORG	PC	FOR FELLOWSHIP	25,000
FRESH LIFE CHURCH120 2ND ST E	SUPPORTED ORG	PC	FOR FELLOWSHIP	2,500

ROLLING MEADOWS, IL 60008				
FRESH LIFE CHURCH120 2ND ST E KALISPELL, MT 59901	SUPPORTED ORG	PC	FOR FELLOWSHIP	2,500

FRESH LIFE CHURCH120 2ND ST E KALISPELL, MT 59901	SUPPORTED ORG	PC	FOR FELLOWSHIP	2,50

Total .

175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Purpose of grant or Recipient If recipient is an individual, Foundation 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 AMERICAN BIBLE SOCIETY SUPPORTED ORG PC. FOR FELLOWSHIP 10,000 1865 BROADWAY NEW YORK, NY 10023

SAMARITAN'S PURSEPO BOX 3000 BOONE, NC 28607	SUPPORTED ORG	PC	FOR ASSISTANCE TO INDIGENT FAMILIES	10,000
BIBLE LEAGUE INTERNATIONAL 1 BIBLE LEAGUE PLAZA	SUPPORTED ORG	PC	FOR FELLOWSHIP	15,000

175,000

▶ 3a

BOONE, NC 28607	SUPPORTED ORG	rc	FAMILIES	10,0
BIBLE LEAGUE INTERNATIONAL 1 BIBLE LEAGUE PLAZA	SUPPORTED ORG	PC	FOR FELLOWSHIP	15,0
CRETE, IL 60417				1

Total . .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation 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				
CORE CHURCHPO BOX 34789 LOS ANGELES, CA 90034	SUPPORTED ORG	PC	FOR FELLOWSHIP	10,000
LEGACY CITY CHURCHPO BOX 1793	SUPPORTED ORG	PC	FOR FELLOWSHIP	20,000

LEGACY CITY CHURCHPO BOX 1793 STUDIO CITY, CA 91604	SUPPORTED ORG	PC	FOR FELLOWSHIP	
BIBLES FOR AMERICAPO BOX 17537	SUPPORTED ORG	PC	FOR FELLOWSHIP	

Total .

BIBLES FOR AMERICAPO BOX 17537 SUPFIRVINE, CA 92623	PPORTED ORG	PC	FOR FELLOWSHIP	5,000

BIBLES FOR AMERICAPO BOX 17537	SUPPORTED ORG	PC	FOR FELLOWSHIP	5,00
RVINE, CA 92623				

175,000

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				
THE GIDEONS INTERNATIONAL PO BOX 140800	SUPPORTED ORG	PC	FOR FELLOWSHIP	7,500

NASHVILLE, TN 37214				
BILLY GRAHAM EVANGELISTIC ASSOC 1 BILLY GRAHAM PARKWAY CHARLOTTE, NC 28201	SUPPORTED ORG	PC	FOR FELLOWSHIP	5,000

BILLY GRAHAM EVANGELISTIC ASSOC 1 BILLY GRAHAM PARKWAY CHARLOTTE, NC 28201	SUPPORTED ORG	PC	FOR FELLOWSHIP	5,000
FEEDING AMERICA 35 E WACKER DR SUITE 2000	SUPPORTED ORG	PC	FOR ASSISTANCE TO INDIGENT	5,000

1 BILLY GRAHAM PARKWAY CHARLOTTE, NC 28201				
FEEDING AMERICA 35 E WACKER DR SUITE 2000 CHICAGO, IL 60601	SUPPORTED ORG	PC	FOR ASSISTANCE TO INDIGENT FAMILIES	5,000

CHARLOTTE, NC 28201				
FEEDING AMERICA 35 E WACKER DR SUITE 2000 CHICAGO, IL 60601	SUPPORTED ORG	PC	FOR ASSISTANCE TO INDIGENT FAMILIES	5,000
Total			▶ 3a	175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation 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 PC FOR FELLOWSHIP 5,000 THE NAVIGATORS3820 N 30TH ST SUPPORTED ORG COLORADO SPRINGS, CO 80904

THE POCKET TESTAMENT LEAGUE 11 TOLL GATE RD LITITZ, PA 17543	SUPPORTED ORG	PC	FOR FELLOWSHIP	5,000
CAMPUS CRUSADE FOR CHRIST 100 LAKE HART DR	SUPPORTED ORG	PC	FOR FELLOWSHIP	5,000

175,000

▶ 3a

ORLANDO, FL 32832

Total . .

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 CAMPASSION INTERNATIONAL SUPPORTED ORG PC FOR ASSISTANCE TO INDIGENT 2.500 12290 VOYAGER PKWY **FAMILIES** 

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

COLORADO SPRINGS, CO 80921				
ST JUDES CHILDREN'S RESEARCH HOSPIT 262 DANNY THOMAS PLACE MEMPHIS, TN 38105	SUPPORTED ORG	EOF	FOR ASSISTANCE TO INDIGENT CHILDREN	5,000
FAITH COMES BY HEARINGHOSANNA MINIS	SUPPORTED ORG	EOF	FOR FELLOWSHIP	2,500

MEMPHIS, IN 38105				
FAITH COMES BY HEARINGHOSANNA MINIS 2421 AZTEC ROAD NE ALBURQUERQUE, NM 87107	SUPPORTED ORG	EOF	FOR FELLOWSHIP	2,500
Total			▶ 3a	175,000

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				
FELLOWSHIP OF CHRISTIAN ATHLETES 8701 LEEDS ROAD KANSAS CITY, MO 64129	SUPPORTED ORG	EOF	FOR FELLOWSHIP	2,500
INTL FELLOWCHID OF CHRISTIANS AND	SUPPORTED ORG	EOE	FOR FELLOWSHIP	2 500

KANSAS CITT, MO 64129				
INTL FELLOWSHIP OF CHRISTIANS AND J 30 NORTH LASALLE ST STE 4300 CHICAGO, IL 60602	SUPPORTED ORG	EOF	FOR FELLOWSHIP	2,500
WOUNDED WARRIOR PROJECT INC	SUPPORTED ORG	PC	FOR ASSISTANCE TO INDIGENT	5.000

30 NORTH LASALLE ST STE 4300 CHICAGO, IL 60602				
WOUNDED WARRIOR PROJECT INC PO BOX 758517 TOPEKA, KS 66675	SUPPORTED ORG	PC	FOR ASSISTANCE TO INDIGENT FAMILIES	5,000

175,000

Total .

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				
CALIFORNIA BAPTIST UNIVERSITY 8432 MAGNOLIA AVE RIVERSIDE, CA 92504	SUPPORTED ORG	PC	FOR FELLOWSHIP	2,500

RIVERSIDE, CA 92504				
BOYS GIRLS CLUBS OF GARDEN GROVE 10540 CHAPMAN AVE GARDEN GROVE, CA 92840	SUPPORTED ORG	EOF	FOR ASSISTANCE TO INDIGENT FAMILIES	2,500

BOYS GIRLS CLUBS OF GARDEN GROVE 10540 CHAPMAN AVE GARDEN GROVE, CA 92840	SUPPORTED ORG	EOF	FOR ASSISTANCE TO INDIGENT FAMILIES	2,500
Total			▶ 3a	175,000

efile GRAPHIC print - DO NOT P	ROCESS	SS As Filed Data - DLN: 93491074005099				
TY 2018 Accounting Fe	es Sch	edule			_	
	Name:	AMIN FO	UNDATION			
<b>EIN:</b> 80-0075857						
Softv	vare ID:	1800721	8			
Software \	ersion:	2018v3.1	1			
Category	Am	ount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
ACCOUNTING FEES		5,200	5,200	0	0	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	D	LN: 93491074005099
TY 2018 Investments Corpora	te Stock Schedule		
Name:	AMIN FOUNDATION		
EIN:	80-0075857		
Software ID:	18007218		
Software Version:	2018v3.1		
Investments Corporation Stock Schedule			
Name of Stoc	k	End of Year Book Value	End of Year Fair Market Value
MUTUAL FUNDS		113,633	

EQUITIES

MUTUAL FUNDS

1,551,445

550,668

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491074005099
TY 2018 Investments - Other	Schedule			
Name:	AMIN FOUNDATION			
EIN:	80-0075857			
Software ID:	: 18007218			
Software Version:	2018v3.1			
nvestments Other Schedule 2				
Category/ Item	Listed at (		Book Value	End of Year Fair Market Value

20101111 20101011				
Investments Other Schedule 2				
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value	
ETFS	FMV	25,687		
REITS	FMV	567,933		
ANNUITIES	FMV	238,373		

TY 2018 Other Income Schedule							
Name:	: AMIN FOUNDATION						
EIN:	80-0075857						
Software ID:	18007218						
Software Version:	2018v3.1						
Other Income Schedule							
Description		Revenue And	Net Investment	Adjusted Net Income			

**Expenses Per Books** 

100,668

Income

DLN: 93491074005099

Other Investment Income

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DLN	N: 93491074005099		
TY 2018 Other Professional Fees Schedule						
Nar	ne: AMIN FOUNI	DATION				
E	<b>EIN:</b> 80-0075857					
<b>Software ID:</b> 18007218						
Software Versi	<b>on:</b> 2018v3.1					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
ADVISOR FEES	44,352	44,352	0	0		

efile GRAPHIC print - DO NOT PRO	CESS As Fil€	ed Data -	-	DL	N: 93491074005099
TY 2018 Taxes Schedule					
N	lame: AMIN	FOUND	DATION		,
<b>EIN:</b> 80-0075857					,
<b>Software ID:</b> 18007218					1
Software Ver	r <b>sion:</b> 2018\	/3.1			
Category	Amount		Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES		85	85		