Form 990-PF

Department of the Treasury

Internal Revenue Service

DLN: 93491114006140

2019

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 2019, or tax year beginning 01-01-20	19 , aı	nd en	ding 12-31-		
		ındatıon mily Foundation				entification numb	er
			1		45-6653445		
		d street (or P O box number if mail is not delivered to street address) gle Trace Way	Room/suite		B Telephone nu	mber (see instruction	ons)
C-1		770 ((714) 283-5800)	
		n, state or province, country, and ZIP or foreign postal code NV 89117			C If exemption	application is pendii	ng, check here
G Cł	neck al	I that apply Initial return Initial return of a	former public charity		D 1. Foreign or	ganizations, check h	ere
		Final return Amended return	,			ganızatıons meeting	
		Address change Name change			test, chec	k here and attach co	omputation 🕨 📙
1 Cł	neck ty		oundation			ındatıon status was n 507(b)(1)(A), che	
	Section	n 4947(a)(1) nonexempt charitable trust	private foundation			. , , , , ,	
		rom Bart II col (c)	🗹 Cash 🔲 Accru	ıal		ation is in a 60-mon n 507(b)(1)(B), che	
		rom Part II, col (c), ▶\$ 633,037 Other (specify)	h \		under Sectio	п 507(в)(т)(в), спе	ck nere
		(Part I, column (d) must	De On Cash Dasis)			.	T
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and	(b)	Net investment	(c) Adjusted net	(d) Disbursements for charitable
		equal the amounts in column (a) (see instructions))	expenses per books	` ´	ıncome	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach					(casii Basis ciii)
		schedule)	250,000				
	2	Check ▶ ☐ If the foundation is not required to attach					
	3	Sch B Interest on savings and temporary cash investments	130		130		
	4	Dividends and interest from securities	11,187	-	11,187		
	5a	Gross rents	,				
	ь	Net rental income or (loss)					
ne	6a	Net gain or (loss) from sale of assets not on line 10	18,861				
Revenue	ь	Gross sales price for all assets on line 6a176,795					
Re	7	Capital gain net income (from Part IV, line 2)			18,861		
	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)	200 170		20 170		
	12	Total. Add lines 1 through 11	280,178	<u> </u>	30,178		
	13 14	Compensation of officers, directors, trustees, etc Other employee salaries and wages	0	1	0		<u> </u>
ıΛ	15	Pension plans, employee benefits					
Se	16a	Legal fees (attach schedule)					
<u>ē</u>	Ь	Accounting fees (attach schedule)	1,000		1,000		
Operating and Administrative Expenses	c	Other professional fees (attach schedule)	<u> </u>		•		
ΙΛe	17	Interest					
E J	18	Taxes (attach schedule) (see Instructions)	9 334		334		
≦ E	19	Depreciation (attach schedule) and depletion					
E	20	Occupancy					
₹	21	Travel, conferences, and meetings					
Ē	22	Printing and publications					
<u>5</u>	23	Other expenses (attach schedule)	2,050		2,050		
rati	24	Total operating and administrative expenses.					
8		Add lines 13 through 23	3,384	_	3,384		
ر	25	Contributions, gifts, grants paid	167,500				167,50
	26	Total expenses and disbursements. Add lines 24 and 25	170,884		3,384		167,50
	27	Subtract line 26 from line 12	170,004		3,304		107,30
	a	Excess of revenue over expenses and					
	Ь	disbursements Net investment income (If negative, enter -0-)	109,294		36.704		
	C D	Adjusted net income (if negative, enter -0-)			26,794		
or		work Reduction Act Notice, see instructions.		<u> </u>	Cat No 11289	<u> </u>	<u> </u> rm 990-PF (2019

264,125

404.649

404,649

404,649

404,649

276,917

513 943

513,943

513,943

513,943

404,649

109,294

513,943

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399,011

633,037

Other notes and loans receivable (attach schedule) ▶

Investments—U S and state government obligations (attach schedule)

Investments—corporate stock (attach schedule)

Prepaid expenses and deferred charges

Investments—land, buildings, and equipment basis ▶

Less accumulated depreciation (attach schedule) ▶

Investments—other (attach schedule)

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

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

and complete lines 24, 25, 29 and 30.

Net assets with donor restrictions . . .

and complete lines 26 through 30.

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

Decreases not included in line 2 (itemize)

Net assets without donor restrictions . . .

Other assets (describe > .

Other liabilities (describe -

Grants payable

Less accumulated depreciation (attach schedule)

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

Mortgages and other notes payable (attach schedule).

Foundations that do not follow FASB ASC 958, check here 🕨 🗹

Foundations that follow FASB ASC 958, check here ▶

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) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

Analysis of Changes in Net Assets or Fund Balances

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

Other increases not included in line 2 (itemize) -

Less allowance for doubtful accounts ▶

	5
	6
	7
S	8
ets	9

10a

b

С

11

12

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24

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29

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Part III

2

3

Liabilities

Fund Balances

ö

Assets 27

Net

	e the kınd(s) of property sold (e g , arehouse, or common stock, 200 shs		(b) How acquired P—Purchase	(c) Date acquired	(d) Date sold
		D—Donation	(mo , day, yr)	(mo , day, yr)	
1a See Additional Data Tabl					
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basıs ense of sale	Gain c	h) or (loss) o) minus (g)
a See Addıtıonal Data Tabl	e				
b					
С					
d					
е					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69		(I)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) of col (ı) (յ), ıf any	col (k), but not	h) gain minus less than -0-) or om col (h))
a See Additional Data Tabl			(3// =/	,	
b					
С					
d					
e					_
·	gain or (loss) as defined in sections I rt I, line 8, column (c) (see instructions I		'	3	18,861
Part V Qualification	Jnder Section 4940(e) for Re	educed Tax on Net	Investment I	income	
(For optional use by domestic p	rivate foundations subject to the sec	ction 4940(a) tax on ne	t investment inco	ome)	
If section 4940(d)(2) applies, le	eave this part blank				
If "Yes," the foundation does no	e section 4942 tax on the distributal of qualify under section 4940(e) Do	not complete this part	· 		es 🗹 No
(a)	nount in each column for each year,	see instructions before	making any entr	ries (d)	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab		Distribution rat (col (b) divided by c	col (c))
2018	89,054		381,149		0 233646
2017	297,419		267,775		1 110705
2016	246,406		235,900		1 044536
2015	148,425		241,707		0 614070
2014	160,400		213,654	. 1	0 750747
2 Total of line 1, column (•				3 753704
number of years the four	o for the 5-year base period—divide (idation has been in existence if less ncharitable-use assets for 2019 from	than 5 years	0, or by the 3		<u>0 750741</u> 544,978
5 Multiply line 4 by line 3			5	:	409,137
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		268
7 Add lines 5 and 6			7		409,405
	ons from Part XII, line 4 , eater than line 7, check the box in Pa		8 oplete that part us		167,500 e the Part VI
mistractions				Г.	rm 000-BE (2010)

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Pai	t VIII-B Statements Regard	ing Activities for Which	Form 4720 May Be	Required (continued)			
5a	During the year did the foundation p	ay or incur any amount to				Yes	No
	(1) Carry on propaganda, or otherw	•		☐ Yes ✓	No		
	(2) Influence the outcome of any sp	·	• • • • • • • • • • • • • • • • • • • •				
	on, directly or indirectly, any vot	-		· · 🗌 Yes 🗸	No		
	(3) Provide a grant to an individual i	• • • • • • • • • • • • • • • • • • • •		☐ Yes 🗹	No		
	(4) Provide a grant to an organization		· -				
	in section 4945(d)(4)(A)? See in (5) Provide for any purpose other th			·· ·	No		
	,, ,	• •	* * * * * * * * * * * * * * * * * * * *				
h	educational purposes, or for the If any answer is "Yes" to $5a(1)-(5)$,	•		⊔ Yes 🖭	No		
b	Regulations section 53 4945 or in a c	•		•	5b		
	Organizations relying on a current no				35		
c	If the answer is "Yes" to question 5a						
Ĭ	tax because it maintained expenditure	• • •	•				
	If "Yes," attach the statement requir			' ' ∐ Yes ∐	No		
6a	Did the foundation, during the year,	· -		ıms on			
	a personal benefit contract?	, , , , , , , , , , , , , , , , , , , ,					
ь	Did the foundation, during the year,			⊔ Yes 🖭	No 6b		No
	If "Yes" to 6b, file Form 8870	. , , , ,	,, ,				
7a	At any time during the tax year, was	the foundation a party to a p	orohibited tax shelter trai	nsaction? Yes	No.		
b	If "Yes", did the foundation receive a	ny proceeds or have any net	income attributable to th	ne transaction?	7b		
8	Is the foundation subject to the section	on 4960 tax on payment(s)	of more than \$1,000,000	in remuneration or			
	excess parachute payment during th	e year [?]		· · 🗌 Yes 🗸	No L		
	Information About O	fficers, Directors, Trus	tees, Foundation Ma	nagers, Highly Paid En		,	
Ра	t VIIII and Contractors						
1	List all officers, directors, trustee	s, foundation managers a	nd their compensation	See instructions			
	(-) None and address	(b) Title, and average	(c) Compensation (If	(d) Contributions to	(e) Expe	nse acc	ount,
	(a) Name and address	hours per week devoted to position	not paid, enter -0-)	employee benefit plans and deferred compensation	other a	llowan	ces
See /	Addıtıonal Data Table	'	,	'			
_2	Compensation of five highest-pai	d employees (other than t	hose included on line :		ne, enter "	NONE	."
(2)	Name and address of each employee :	(b) Title, and average		(d) Contributions to employee benefit	(e) Expen	CO 3000	ount
(a)	more than \$50,000	nours per week	(c) Compensation	plans and deferred	other al		
		devoted to position		compensation			
NON							
-							
Tota	I number of other employees paid ove						
	i number of other employees pald ove	. φου,ουσι ι ι ι ι	 		Form 99	O-DE	(2010

Page **6**

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	id Employees,
3 Five highest-paid independent contractors for professional service	es (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 rele- organizations and other beneficiaries served, conferences convened, research papers produc		of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see II	nstructions)	
Describe the two largest program-related investments made by the foundation during th	<u> </u>	Amount
1	,	
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		• 0
		Form 990-PF (2019)

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

1b

2

3a 3h

4

5

167,500

167.500

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

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.

Amounts set aside for specific charitable projects that satisfy the

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

2

3

4

5

Page 9

26,713

26,713

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0

•	
XIII	ľ

b Total for prior years

From 2014.

b From 2015. . . . c From 2016. . .

From 2017. . . .

e From 2018.

Part

J-PF	(2)	υI	9)	
7111	Į		-		

-PF (Z	019)
Ш	Undistribute

a Enter amount for 2018 only.

Excess distributions carryover, if any, to 2019

f Total of lines 3a through e.

d Applied to 2019 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2019

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 2018 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2019 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 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 2014 not

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2020.

10 Analysis of line 9 a Excess from 2015. .

b Excess from 2016. .

d Excess from 2018. .

e Excess from 2019. . .

c Excess from 2017. . . .

(If an amount appears in column (d), the

6 Enter the net total of each column as

indicated below:

4 Qualifying distributions for 2019 from Part XII, line 4 🕨 \$ a Applied to 2018, 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).

art XIII	Undistributed Income (see instruct					
Distributab	le amount for 2019 from Part XI, line 7					

Distributable amount for 2019 from Part XI, line 7	
Undistributed income, if any, as of the end of 2019	

149.821 136,487

234 767

284.192 70,196

136.487 234,767

284.192

70.196

140.787

(a)

Corpus

875,463

140.787

1,016,250

149.821

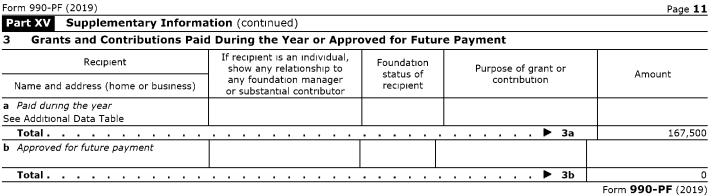
866,429

(b)

Years prior to 2018

(c)

2018



Enter gros	s amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
_	m service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
е						
2 Memb	and contracts from government agencies ership dues and assessments st on savings and temporary cash					
	ments			14	130	
	nds and interest from securities ntal income or (loss) from real estate			14	11,187	
	:-financed property					
	debt-financed property					
	ntal income or (loss) from personal property					
	investment income					
8 Gain o	or (loss) from sales of assets other than ory			10	10.061	
	come or (loss) from special events			18	18,861	
	profit or (loss) from sales of inventory					
	revenue a					
b						
	tal Add columns (b), (d), and (e).		0		20.470	(
					30,178	
					<u> </u>	
13 Total	Add line 12, columns (b), (d), and (e)	lations)			30,170	
13 Total (See v		lations)		13	<u> </u>	
L 3 Total (See v	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcular T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exp	lations) le Accomplish income is report	nment of Exem	pt Purposes f Part XVI-A contribu	ted importantly to	30,178
13 Total (See v Part XV Line No.	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculars Relationship of Activities to the Explain below how each activity for which	lations) le Accomplish income is report	nment of Exem	pt Purposes f Part XVI-A contribu	ted importantly to	30,178
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Part XVII	Information Regarding Transfers To and Transactions and Relationships With Noncharital Exempt Organizations	ble	
D. J. bl			$\overline{}$

Part	XVII	Exempt Organi	zations					•				
 Did 	the org	janization directly or in than section 501(c)(3)	directly enga						on 501		Yes	No
a Tran	a Transfers from the reporting foundation to a noncharitable exempt organization of											
(1) Cash							. 1a	1)		No		
		assets							. 1a	2)		No
b Other transactions												
(1) Sales of assets to a noncharitable exempt organization								. 1b(_		No No	
		l of facilities, equipmer							1b	_		No
` '		oursement arrangemen	•						. 1b	-+		No
		or loan guarantees.							. 1b	-+		No
		mance of services or m										No
c Sha	rıng of	facılıtıes, equipment, n	nailing lists,	other assets, or	paid employees.				. 1	С		No
of tl	ne good	ver to any of the above ds, other assets, or ser- saction or sharing arra	vices given b	y the reporting	foundation If the	foundat	ion receive	d less than fair mar	ket value			
(a) Line	No	(b) Amount involved	(c) Name of	noncharitable exe	mpt organization	(d) De	escription of	transfers, transactions,	and sharing	rran	gemen	ts
des	cribed i	dation directly or indire n section 501(c) (other emplete the following so	than section	*	•				es 🗹 No			
		(a) Name of organization	on	(1) Type of organizat	ion		(c) Description	of relationshi)		
	of m	er penalties of perjury, y knowledge and belief n preparer has any kno	, it is true, c									
Sign Here		****			2020-04-16	\	*****		May the IR return with the pr			
	9	ignature of officer or trustee		Date		Title			below (see instr)	✓	Yes 🗆] _{No}
		Print/Type preparer's	name	Preparer's Signature		Date		Check if self- employed ▶ □	PTIN P00	3397	731	
Paid Prep	arer	Kırk T Reidinger Firm's name ▶ Step	hens Peidins	ger & Beller LLP								
Use (Fırm's EIN ▶	33-0	06395	99
	-			eet Suite 890 1, CA 92660					Phone no (9	49)	752-7	7400
			,									

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (c) (d) (b) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation Р 2019-08-22 2019-12-06 100 sh Arısta 150 sh Bank of America Ρ 2018-12-20 2019-08-22 500 sh Ford Motor Р 2019-01-03 2019-08-07 500 sh Pfizer Inc Р 2018-12-19 2019-08-22 100 sh Starbucks Ρ 2018-11-19 2019-08-07 Ρ 750 sh Bank of America 2013-03-12 2019-08-08 Ρ 250 sh Bank of America 2013-03-12 2019-08-22 Р 2019-08-07 1000 sh Ford Motor 2017-10-16 925 Sh Global X Ρ 2017-03-07 2019-08-16 Р 2012-07-20 2019-11-22 200 sh Merck & Co Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 19,008 22,754 -3,7464,077 3,628 449 4,740 3,967 773 17,572 21,370 -3,798 9,485 6,817 2,668 21,336 9,000 12,336 6,795 3,000 3,795 9,481 12,480 -2,999 14,828 19,148 -4,32017,192 8,694 8,498 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any -3,746449 773 -3,7982,668 12,336 3,795 -2,999 -4,320 8,498

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 7 sh P J T Partners 2015-10-01 Ρ 2019-08-06 3 sh Seadrill Р 2017-03-07 2019-08-06 500 sh Taiwan Semiconductr Ρ 2018-07-09 2019-08-22 300 sh Verizon Р 2018-08-07 2019-11-22 95 sh Vulcan Ρ 2017-03-02 2019-08-07 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (or allowable) (q) plus expense of sale (h) (e) plus (f) minus (g) (f) 275 27 248 921 -918 21,061 18,855 2,206 17,941 15,723 2,218 13.001 11.550 1,451 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or Excess of col (1) (i) F M V as of 12/31/69 Adjusted basis Losses (from col (h)) **(I)** (j) as of 12/31/69 (k) over col (j), if any 248 -918 2,206 2,218 1,451

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, not paid, enter Contributions to (e) other allowances hours per week (b) devoted to position -0-) employee benefit plans and deferred compensation George Chami Director 0 10 2009 Eagle Trace Way Las Vegas, NV 89117

Marcıa Chamı	Director	0	0	0
2009 Eagle Trace Way Las Vegas, NV 89117	0 10			
George Albert Chamı II	Director	0	0	0
3808 Welsh Pony	0 10			

Las Vegas, NV 89117				
George Albert Chamı II	Director	0	0	0
3808 Welsh Pony Yorba Linda, CA 92886	0 10			
	_			_

George Albert Chami II	Director	0	0	0
3808 Welsh Pony Yorba Linda, CA 92886	0 10			
Mardah Chamı	Director	0	0	0
3647 22nd Street	0 10			

Yorba Linda, CA 92886				
Mardah Chamı	Director	0	0	0
3647 22nd Street San Francisco, CA 94114	0 10			

Sandra Poiser	Director	0	0	
3647 22nd Street San Francisco, CA 94114	0 10			
Maruan Chami	Director	U	U	l o

San Francisco, CA 94114				
Sandra Poiser	Director	0	0	
	1 0 10			

18112 Catherine Circle Villa Park, CA 92861

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

George Chami Marcia Chami

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)

8700 Beverly Blvd Los Angeles, CA 90048

Total .

	or substantial contributor			
a Paid during the year				
Fulfillment Fund 6100 Wilshire Blvd Suite 600 Los Angeles, CA 90048	None	501(c)(3)	Medical support	1,500
Children's Hospital of Orange County 1201 W La Veta Orange, CA 92868	None	501(c)(3)	Medical support	5,000

recipient

,000

167,500

ı	Los Angeles, CA 90048				
ı	Children's Hospital of Orange County 1201 W La Veta Orange, CA 92868	None	501(c)(3)	Medical support	5,1
I	Cedars-Sınaı Medical Center	None	501(c)(3)	Medical support	25,0

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	
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
Alisa Ann Ruch California Burn Foundation 50 N Hill Ave 305 Pasadena, CA 91106	None	501(c)(3)	Provide burn prevention education and support for burn survivors	1,000
Dedham Health Foundation20 Hale Dr Dedham, MA 020265531	None	501(c)(3)	Medical support	75,000
St Jude Children's Research Hospital 4171 W Hillsboro Blvd Coconut Creek, FL 33073	None	501(c)(3)	Kids with cancer support	10,000
Total	167,500			

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

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

St John of Damascus Church 300 West Street Dedham, MA 020265594	None	501(c)(3)	Community support of those in need	10,000
UCLA Jonsson Cancer Center	None	501(c)(3)	University education support	25,000

				1
UCLA Jonsson Cancer Center 8-684 Factor Building Box 951781 Los Angeles, CA 900951781	None	501(c)(3)	University education support	25,000
UCLA Foundation10920 Wilshire Blvd	None	501(c)(3)	University education support	15,000

8-684 Factor Building Box 951781 Los Angeles, CA 900951781				
UCLA Foundation10920 Wilshire Blvd Los Angeles, CA 900246516	None	501(c)(3)	University education support	15,000

167,500

Los Angeles, CA 900951/81				
UCLA Foundation10920 Wilshire Blvd Los Angeles, CA 900246516	None	501(c)(3)	University education support	15,0

Total . .

efile GRAPHIC print - DO NOT PROCESS	As Filed D	ata -		DLN: 93491114006140			
TY 2019 Accounting Fees Schedule							
Name	: Chamı Fa	mily Foundation					
EIN: 45-6653445							
	. 15 0055	113		<u> </u>			
Category An	nount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
Accounting	1,000	1,000		0			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491114006140
TY 2019 Investments Corpora	te Stock Schedule	
Name:	Chami Family Foundati	on
EIN:	45-6653445	

Investments Corporation Stock Schedule					
Name of Stock		End of Year Book Value	End of Year Fair Market Value		
Stocks		276,917	399,011		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491114006140				
TY 2019 Other Expenses Schedule								
	: Chamı Famıly F : 45-6653445	oundation						
Other Expenses Schedule								
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes				

2,050

2,050

LIN.	73	
Other Expenses Schedule		
Description	-	26

Investment fees

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TY 2019 Substantial Contributors								
Schedule								
Name: Chami Family Foundation								
EIN: 45-6653445								
			1					
· I			,					
Name			Address					

efile GRAPHIC print - DO NOT	PROCESS As F	iled Data -		DLI	N: 93491114006140	
TY 2019 Taxes Schedule						
	Name: Cha EIN: 45-	•	y Foundation			
Category	Amoun	t	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
Tax		334	334		0	

efile GRAPHIC print - DO	NOT PROCESS	As Filed Data -				DLN: 93491114006140	
Schedule B		Schedul	e of Contributors			OMB No 1545-0047	
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	1		orm 990, 990-EZ, or 990-PF <u>(Form990</u> for the latest informa	ition		2019	
Name of the organization Chami Family Foundation					Employer id	lentification number	
					45-6653445		
Organization type (chec	k one)						
Filers of:	Section:						
Form 990 or 990-EZ	or 990-EZ						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	☐ 527 politic	cal organization					
Form 990-PF	5 01(c)(3)	exempt private foun	dation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3)	taxable private foun	dation				
			that received, during the yean nplete Parts I and II See inst				
Special Rules							
under sections 50 received from any	9(a)(1) and 170(b)(one contributor, di	(1)(A)(vi), that check	Form 990 or 990-EZ that met ed Schedule A (Form 990 or contributions of the greater of ete Parts I and II	990-EZ), Pa	art II, line 13,	16a, or 16b, and that	
during the year, to	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						
during the year, could be during the year, could be during the year, could be during the during the year, could be during the year.	ontributions <i>exclusi</i> ked, enter here the mplete any of the p	<i>ively</i> for religious, ch total contributions th parts unless the Gen	r (10) filing Form 990 or 990-i aritable, etc., purposes, but r nat were received during the y eral Rule applies to this orga more during the year	no such cont year for an e anization bed	ributions tota exclusively re cause it recei	led more than \$1,000 ligious, charitable, etc , ved <i>nonexclusively</i>	
990-EZ, or 990-PF), but i	t must answer "No'	" on Part IV, line 2, o	and/or the Special Rules doe if its Form 990, or check the b the filing requirements of Scl	box on line H	of its Form		
For Paperwork Reduction Action Form 990, 990-EZ, or 990-		ructions	Cat No 30613X	Schedul	е В (Form 990	, 990-EZ, or 990-PF) (2019)	

Schedule	B (Form 990, 990-EZ, or 990-PF) (2019)			Page 4
	rganization nily Foundation			Employer identification number
Part III	Exclusively religious, charitable, etc., conthan \$1,000 for the year from any one cont	tributor. Complete of total of exclusively instructions.)	olumns (<mark>a)</mark> thro ⁄ religious, chari	d in section 501(c)(7), (8), or (10) that total more rugh (e) and the following line entry. For itable, etc., contributions of \$1,000 or less for
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, address, and	` '	nsfer of gift Rela	ationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, address, and	` '	nsfer of gift Rela	ationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, address, and		nsfer of gift Rela	ationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, address, and	ationship of transferor to transferee		
	- I ransieree's name, address, and			ationship of transferor to transferee Schedule B (Form 990, 990-EZ, or 990-PF) (2019