Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

▶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.

For	calend	dar year 2019 or tax year beginning ,	and ending				
Na	ame of fou	undation			A Emp	loyer identification number	
	T 1 -	angel Foundation			47	7-2570087	
		d street (or P O box number if mail is not delivered to street address)	R	oom/suite		phone number (see instructions	<u> </u>
_		Raeburn Court				0-977-8953	,
	-	, state or province, country, and ZIP or foreign postal code			C If exe		ahasik basa
E	'aye	tteville NC 28314			C 11 0X	emption application is pending,	CHECK HEIB
G	Check a	all that apply Initial return Initial retu	rn of a former public ch	arity	D 1 F	oreign organizations, check he	re ▶ 📗
		Final return Amended	return		2 F	oreign organizations meeting th	ne
		Address change Name cha	ange		8	5% test, check here and attach	computation •
H	Check t	type of organization X Section 501(c)(3) exempt private	foundation	04	E If pro	vate foundation status was tem	ninated under
	Section	n 4947(a)(1) nonexempt charitable trust Other taxab	le private foundation		secti	on 507(b)(1)(A), check here	▶ ∐
l F	air mar	rket value of all assets at J Accounting method	X Cash	rual		foundation is in a 60-month ter	
		ear (from Part II, col (c), Uther (specify)			unde	r section 507(b)(1)(B), check h	ere L
100	ne 16)		be on cash basis)	г			
	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net inv		(c) Adjusted net	(d) Disbursements for chantable
		the amounts in column (a) (see instructions))	books	incon	ne 	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	11,300				
12	2	Check ► if the foundation is not required to attach Sch. B					
_	3	Interest on savings and temporary cash investments		L			
4	4	Dividends and interest from securities					
	5a	Gross rents	a4 Photos comotas Comosciolidescibilida	II. e F.J. tabhtaffa (ii dalladii)	pina Phalandina. Ta	n ancie una ma necesaren estan anez establiaren ann.	
ē	b	Net rental income or (loss)					
ē	6a	Net gain or (loss) from sale of assets not on line 10			AL EDDA ELITA Energia		
الاعرام Revenue	b	Gross sales price for all assets on line 6a		er aleggestroge			
32	8	Capital gain net income (from Part IV, line 2) Net short-term capital gain					
•	9	Income modifications					
7	10a	Gross sales less returns and allowances					
Z Z	ь	Less Cost of goods sold					
⇒	С	Gross profit or (loss) (attach schedule)					
1	11	Other income (attach schedule) Stmt 1	10,000		10,000	10,000	
<u></u>	12	Total. Add lines 1 through 11	21,300		10,000	10,000	
Zo	13	Compensation of officers, directors, trustees, etc.	0				
Se	14	Other employee salaries and wages					
Se Contract of the contract of	15	Pension plans, employee benefits				RECEIVED	—
EX	16a	Legal fees (attach schedule)	755		╂┲═	1	
je I	b	Accounting fees (attach schedule) Stmt 2	755	 	8	1	280
æţ	17	Other professional fees (attach schedule)			- 8 -	NOV 1 7 2020	\$8
str	17 18	Interest Taxes (attach schedule) (see instructions)			 		
Ë	19	Depreciation (attach schedule) and depletion				OGDEN, UT	
Ę	20	Occupancy					demonstrated in the second sec
Ă	c Other professional fees (attach schedule) 17 Interest 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (att sch) 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, grifts, grants paid						
ī	22	Printing and publications					
Ē)	23	Other expenses (att sch) Stmt 3	26				
24 Total ope		Total operating and administrative expenses.					
era		Add lines 13 through 23	781	one of many many persons	0		0
ā	25	Contributions, gifts, grants paid	15,964				15,964
_	26	Total expenses and disbursements. Add lines 24 and 25	16,745	erne maranament	O Companie	O	15,964
	27	Subtract line 26 from line 12	4 555				
	a	Excess of revenue over expenses and disbursements	4,555		.0,000		
	b	Net investment income (if negative, enter -0-)				10.000	

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with		
end-of-year figure reported on prior year's return)	1	274,311
2 Enter amount from Part I, line 27a	2	4,555
3 Other increases not included in line 2 (itemize) ▶ See Statement 5	3	1
4 Add lines 1, 2, and 3	4	278,867
5 Decreases not included in line 2 (itemize) ▶ See Statement 6	5	87
5. Total not accept or fund halances at and of year (line 4 minus line 5) - Part II. column (h) line 29		278.780

Form 990-PF (2019)

Part V Capital Gains a	nd Losses for Tax on Investme	nt Income				
	e the kınd(s) of property sold (for example, real estate, arehouse, or common stock, 200 shs MLC Co)		(b) How acquired P – Purchase D – Donation	(c) Date ac (mo , day		(d) Date sold (mo , day, yr)
1a N/A						
		·				
<u>c</u>			<u> </u>			
<u>d</u>			ļ			
			<u>L</u>			
(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale			or (loss)) minus (g))
<u>a</u>						
<u>c</u>						
d						
Complete only for assets showing	gain in column (h) and owned by the four	dation on 12/31/60		· · · · ·		
Complete only for assets showing	· · · · · · · · · · · · · · · · · · ·					(h) gain minus less than -0-) or
(I) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i) I (j), if any			om col (h))
<u>a</u>						
<u>b</u>						
_d						
						
2 Capital gain net income or (net ca	pital loss) If gain, also enter in F	Part I, line 7		2		
3 Net short-term capital gain or (los	s) as defined in sections 1222(5) and (6)					
If gain, also enter in Part I, line 8,	column (c) See instructions If (loss), ente	r -0- in				
Part I, line 8				3		
Part V Qualification Ur	nder Section 4940(e) for Reduce	ed Tax on Net I	nvestment Incon	<u>ne</u>		· · · · · · · · · · · · · · · · · · ·
(For optional use by domestic private	foundations subject to the section 4940(a)	tax on net investme	ent income)			
If section 4940(d)(2) applies, leave thi	s part blank					1
Was the foundation liable for the cost	on 4042 tay on the distabilitable amount of	any year in the has	o norad?			Yes X No
	on 4942 tax on the distributable amount of under section 4940(e) Do not complete the	• •	e penou ,			res 21 No
			any ontros			
(a)	ach column for each year, see the instruct	ions before making				(d)
Base period years	(b) Adjusted qualifying distributions	Net valu	(c) e of nonchantable-use assets			nbution ratio
Calendar year (or tax year beginning in)		, 900	277,9		(COI (D) C	0.053610
<u>2018</u> 2017		,000	280,2			0.049961
2016		,500	290,5			0.053355
2015		, 300	293,5			0.03333
2015			12,3			
2014						
2 Total of line 1, column (d)				2	ı	0.156926
	-year base period - divide the total on line	2 by 5 0, or by				
-	n has been in existence if less than 5 year			3		0.052309
4 Enter the net value of noncharitab	le-use assets for 2019 from Part X, line 5			4		276,079
	·					
5 Multiply line 4 by line 3				5		14,441
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)			6	_	100
	,					
7 Add lines 5 and 6				7		14,541
8 Enter qualifying distributions from Part XII, line 4					15,964	
	line 7, check the box in Part VI, line 1b, ar	d complete that par	t using a 1% tax rate	See the		
Part VI instructions						

COMPANIES AND ADDRESS OF THE PARIES		Juliangel Foundation			70087				Page 4	<u>4</u>
P	art VI Ex	cise Tax Based on Investment	ncome (Section 4940(a)	, 4940(b), 4	940(e), or 4948	3 – se	e ins	truction	s)	
1a	Exempt opera	ing foundations described in section 4940	(d)(2), check here ▶ and	d enter "N/A" or	line 1					
	Date of ruling	or determination letter	(attach copy of letter if ne	cessary—see	instructions)					1
b	Domestic four	dations that meet the section 4940(e) req	uirements in Part V, check)	1			100	<u>)</u>
	here ▶ X	and enter 1% of Part I, line 27b								4
c	All other dome	stic foundations enter 2% of line 27b Exe	mpt foreign organizations, enter	4% of						ĺ
	Part I, line 12,	col (b)				1				
2	Tax under sec	ion 511 (domestic section 4947(a)(1) trus	ts and taxable foundations only,	others, enter -0	-)	2			0	<u>)</u>
3	Add lines 1 an	12				3			100	<u>)</u>
4	Subtitle A (inc	me) tax (domestic section 4947(a)(1) true	its and taxable foundations only,	others, enter -0)-)	4			0	<u>)</u>
5	Tax based or	investment income. Subtract line 4 from	line 3 If zero or less, enter -0-			5		III.000. 2014.	100) =
6	Credits/Payme	nts								4
a	2019 estimate	tax payments and 2018 overpayment cr	edited to 2019	6a						
b		organizations - tax withheld at source		6b						1
C	•	pplication for extension of time to file (Fo	m 8868)	6c						
q		lding erroneously withheld		6d						
7		nd payments Add lines 6a through 6d	r			7				_
8	, ,	alty for underpayment of estimated tax C	_	attached		8				-
9		total of lines 5 and 8 is more than line 7,			.	9			100	<u> </u>
10	· -	If line 7 is more than the total of lines 5 a		d	.	10				_
11	B-1-1 B. I- 0-101-7-1	unt of line 10 to be Credited to 2020 est			Refunded ▶	11				-
		Statements Regarding Activitie	· · · · · · · · · · · · · · · · · · ·						 _	-
1a		year, did the foundation attempt to influen	ce any national, state, or local leg	gisiation or did i				Ye	es No	-
L	•	itervene in any political campaign?	Al	0 C 45-				1a	+≏	-
Ь		ore than \$100 during the year (either direct	tly or indirectly) for political purpo	oses / See the					x	
	instructions for		nation of the nativities and come	. of a.s., motossa	la.			1b		4
		"Yes" to 1a or 1b, attach a detailed desc stributed by the foundation in connection	•	s or any materia	15					
_		non file Form 1120-POL for this year?	viti the activities					1c	X	1
ď		int (if any) of tax on political expenditures	(section 4955) imposed during th	ne vear						Į.
u		ndation > \$		•						The second secon
e		pursement (if any) paid by the foundation				_				1
·		nanagers > \$	dining the year for pointed expen	andro tax impor	,00					
2		tion engaged in any activities that have n	 ot previously been reported to the	e IRS?				2	X	9
		a detailed description of the activities								Emin
3		tion made any changes, not previously re	ported to the IRS, in its governing	g instrument, ar	ticles					
		, or bylaws, or other similar instruments?						3	X	•
4a	Did the founda	ion have unrelated business gross incom	e of \$1,000 or more during the ye	ear?				4a	X	•
b		iled a tax return on Form 990-T for this y				N	I/A	4b		•
5	Was there a liqui	dation, termination, dissolution, or substantial co	ntraction during the year?					5	X	_
		e statement required by General Instruction T								
6	Are the require	ments of section 508(e) (relating to section	ns 4941 through 4945) satisfied	either						
	By language	in the governing instrument, or								1
	By state legis	lation that effectively amends the governi	ng instrument so that no mandat	ory directions th	at					
		state law remain in the governing instrur						6 3		
7		ion have at least \$5,000 in assets at any			ol (c), and Part XV	<i>'</i>		7 3		a
8a	Enter the state	s to which the foundation reports or with w	hich it is registered. See instruct	ions 🕨						
	N								MESA	
b		"Yes" to line 7, has the foundation furnish			ral					l
	•	of each state as required by General Instr						8b X		đ
9		n claiming status as a private operating fo								_
		alendar year 2019 or the tax year beginnii	g in 2019? See instructions for F	Part XIV If "Yes	n I					2
	complete Part							9	X	
10		s become substantial contributors during	he tax year? If "Yes," attach a so	nedule listing th	neir				7.7	
	names and add		FTP		TOT			10 Form 990-	X DE sous	
J	.1/15 IN	r 1	LIE	4		10	٦ (-om 33U-	r:r (2019)	1

P	art VII-A Statements Regarding Activities (continued)					
				調調	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the					
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions			11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified					
	person had advisory privileges? If "Yes," attach statement. See instructions			12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application	n?		13	X	
	Website address ► N/A					
14	The books are in care of ▶ Garnik Ohanian Tele	phone no 🕨	910-9	77-	895	3
	3698 Raeburn Court					
	Located at ▶ Fayetteville NC	ZIP+4 ▶	28314	1		
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			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority				Yes	No
	over a bank, securities, or other financial account in a foreign country?			16	-	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of					
_	the foreign country					
EP:	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.	<u></u>			Yes	No
1a	During the year, did the foundation (either directly or indirectly)					
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		_			
	disqualified person?	Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	_	_			
	the benefit or use of a disqualified person)?	Yes	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		_			
	foundation agreed to make a grant to or to employ the official for a period after					
	termination of government service, if terminating within 90 days)	Yes	X No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in		_			
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions		N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here		▶ 🗌			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that					
	were not corrected before the first day of the tax year beginning in 2019?		N/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private					
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))					
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines	_				
	6d and 6e) for tax year(s) beginning before 2019?	Yes	X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20					
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)					
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		/-			
	all years listed, answer "No" and attach statement – see instructions)		N/A	2b	adial.re-rea	E. 1801. In . In
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here					
	▶ 20 , 20 , 20 , 20					
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		E2			
	at any time during the year?	Yes	X No			
þ	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or					
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the					
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of					
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the		/-			
	foundation had excess business holdings in 2019)		N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a	n.effrejpleste I b	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			(Herringstra		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019	?		4b		X

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P	Statements Regarding	Activities for Which Form	4720 May Be R	equired (con	inued)	
5a	During the year did the foundation pay or incur	r any amount to				Yes No
	(1) Carry on propaganda, or otherwise attempt	ot to influence legislation (section 49	945(e))?		Yes X No	
	(2) Influence the outcome of any specific pub	lic election (see section 4955), or to	carry on,	<u></u>		
	directly or indirectly, any voter registration	drive?			Yes X No	
	(3) Provide a grant to an individual for travel,	study, or other similar purposes?			Yes X No	
	(4) Provide a grant to an organization other th	nan a charitable, etc , organization d	escribed in		_	
	section 4945(d)(4)(A)? See instructions				Yes X No	
	(5) Provide for any purpose other than religion	us, charitable, scientific, literary, or e	educational		_	
	purposes, or for the prevention of cruelty t	o children or animals?			Yes X No	
b	If any answer is "Yes" to 5a(1)-(5), did any of	the transactions fail to qualify under	the exceptions des	cnbed		
	in Regulations section 53 4945 or in a current	notice regarding disaster assistance	e? See instructions		N/A	5b
	Organizations relying on a current notice regain	rding disaster assistance, check her	re		▶ 🗌	
С	If the answer is "Yes" to question 5a(4), does to	the foundation claim exemption from	n the tax			
	because it maintained expenditure responsibili	ity for the grant?		N/A 🗌	Yes No	
	If "Yes," attach the statement required by Regi	ulations section 53 4945–5(d)				
6a	Did the foundation, during the year, receive an	y funds, directly or indirectly, to pay	premiums	_	_	
	on a personal benefit contract?				Yes X No	
b	Did the foundation, during the year, pay premit	ums, directly or indirectly, on a pers	onal benefit contract	?		6b X
	If "Yes" to 6b, file Form 8870				_	
7a	At any time during the tax year, was the found	ation a party to a prohibited tax shel	ter transaction?		Yes X No	
b	If "Yes," did the foundation receive any procee	ds or have any net income attributa	ble to the transaction	n?	N/A	7b
8	is the foundation subject to the section 4960 to	ax on payment(s) of more than \$1,0	00,000 in			
- Intil Line Line	remuneration or excess parachute payment(s)			<u></u>	Yes X No	
Pa	itiVIII Information About Office	rs, Directors, Trustees, Fo	undation Mana	gers, Highly	Paid Employe	es,
	and Contractors					·
<u>1</u> L	ist all officers, directors, trustees, and foun	dation managers and their comp	ensation. See inst	ructions.		,
			(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(e) Expense account,
	(a) Name and address	s	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred	other allowances
		· · · · · · · · · · · · · · · · · · ·	 		compensation	
	rnık Ohanıan	Fayetteville	President	ĺ	1	Ì
	98 Raeburn Court	NC 28314	1.00	<u> </u>	0	0
	gel Ebrahıme	Fayetteville	Secretary			
36	98 Raeburn Court	NC 28314	0.00	9	0	
			1			1
		 	 	<u> </u>	 	
			<u></u>	L		<u> </u>
2	Compensation of five highest-paid employe "NONE."	ees (other than those included of	n line 1 – see instri	uctions). If none	, enter	
	NONE.			,	T 0	T
	(a) Name and address of each ampleurs and ma	then \$50,000	(b) Title, and average hours per week	(-) Componenting	(d) Contributions to employee benefit	(e) Expense account,
	(a) Name and address of each employee paid mo	re tnan \$50,000	devoted to position	(c) Compensation	plans and deferred compensation	other allowances
			 		Compensation	
NO	NE.		1			
			 		 -	
					 	
			1			ĺ
			 		+	
					1	
			 		 	
]]	
Total	number of other employees paid over \$50,000		L	<u> </u>		0
· Juai	Trainizer of other employees paid over \$50,000	 				990 PE (242)

For	m 990-PF (2019) 💹 บ ัน	illanger roundation	47-2570087		Page <i>I</i>
P	esemmental in the second of th	nation About Officers, Directors, Trustees, contractors (continued)	Foundation Managers, Highly Paid E	mplo	yees,
3		ndependent contractors for professional services. Se	ee instructions. If none, enter "NONE."		
		(a) Name and address of each person paid more than \$50,000	(b) Type of service		(c) Compensation
N	IONE				
	<u> </u>				
					•
					
			[
Tota	al number of others rece	eiving over \$50,000 for professional services		- ▶	
		mary of Direct Charitable Activities			
Lis	st the foundation's four largest d	lirect chantable activities during the tax year. Include relevant statistical infon nes served, conferences convened, research papers produced, etc.	malion such as the number of		Expenses
1	N/A			+	
					_
2					
				4—	
3					
				+	
4					
P	art IX-B	mary of Program-Related Investments (see	e instructions)		
	escribe the two largest program-	related investments made by the foundation during the tax year on lines 1 ar			Amount
1	N/A				
_				+	
2					
An	other program-related investme	ants See instructions		+	
3	on or program related introduction	95554 6910/10			
-				1	

Total. Add lines 1 through 3

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

Form 990-PF (2019) Juliangel Foundation

Rank Minimum Investment Return (All dom

	minimum investment Return (All domestic foundations must complete this part Foreign	toundations	S,
	see instructions)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	_1b	6,371
С	Fair market value of all other assets (see instructions)	1c	273,912
d	Total (add lines 1a, b, and c)	1d	280,283
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	280,283
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	4,204
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	276,079
6	Minimum investment return. Enter 5% of line 5	6	13,804
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for	oundations	
Arribanas II m	and certain foreign organizations, check here ▶ ☐ and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	13,804
2a	Tax on investment income for 2019 from Part VI, line 5	4111	
b	Income tax for 2019 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	100
3	Distributable amount before adjustments Subtract line 2c from line 1	3	13,704
4	Recovenes of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	13,704
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,	- 	
•	line 1	7	13,704
P	art XIII Qualifying Distributions (see instructions)		
1			
а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	15,964
b	Program-related investments – total from Part IX-B	1b	
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		
а	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	15,964
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		13,301
5	Enter 1% of Part I, line 27b. See instructions	5	100
6		6	15,864
U	Adjusted qualifying distributions. Subtract line 5 from line 4		13,004
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	1	

Form 990-PF (2019) Juliangel Foundation 47-2570087 Undistributed Income (see instructions) (a) (c) (d) Corpus Years pnor to 2018 2018 2019 Distributable amount for 2019 from Part XI, 13,704 line 7 2 Undistributed income, if any, as of the end of 2019 12,425 a Enter amount for 2018 only b Total for prior years 20 , 20 Excess distributions carryover, if any, to 2019 a From 2014 From 2015 From 2016 d From 2017 e From 2018 Total of lines 3a through e Qualifying distributions for 2019 from Part XII, ____15,964 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) d Applied to 2019 distributable amount e Remaining amount distributed out of corpus Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b Taxable amount - see instructions e Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount - see instructions Undistributed income for 2019 Subtract lines 4d and 5 from line 1. This amount must be 10,165 distributed in 2020 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) Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9

Excess from 2015 Excess from 2016 Excess from 2017 Excess from 2018 Excess from 2019

Total Approved for future payment N/A 15,96	Part XV Supplementary Information (co				
Name and address (home or business) a Part denny to per Armenia Fund 111 N. Jackson St. Glendale CA 91206 Children of Fallen Patriots 44900 Prentice Dr. Dulles VA 20166 D Approved for future payment N/A	3 Grants and Contributions Paid During t	he Year or Approved for	Future Payment		
Name and address (home or business) a Padd dump to pear Armenia Fund 111 N. Jackson St. Glendale CA 91206 Children of Fallen Patriots 44900 Prentice Dr. Dulles VA 20166 7ctal Total Total Approved for future payment N/A		show any relationship to	status of		Amount
Armenia Fund 111 N. Jackson St. Glendale CA 91206 Children of Fallen Patriots 44900 Prentice Dr. Dulles VA 20166 Total b. Approved for luture payment N/A			recipient		
Ill N. Jackson St. Glendale CA 91206 Children of Fallen Patriots 44900 Prentice Dr. Dulles VA 20166 Total b. Approved for future payment N/A					
Glendale CA 91206 Children of Fallen Patriots 44900 Prentice Dr. Dulles VA 20166 Potential Dr. Dulles VA 20166 Total Approved for luture payment N/A			E01 (0) (2)		
Total Approved for future payment N/A Total Approved for future payment N/A			501 (C) (3)		15.00
44900 Prentice Dr. Dulles VA 20166 96 .:	Glendale CA 91206		Gene	rai rund	15,00
44900 Prentice Dr. Dulles VA 20166 96 .:	Children of Fallen Patriots				
Dulles VA 20166 96 1otal 1otal Approved for future payment N/A					
Total Approved for future payment N/A 15,96					964
Total b Approved for future payment N/A 15,96					
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N/A	b Approved for future payment				
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Total > 3b]	
	Total		<u></u>	▶ 3b	

Part XVI A Analysis of Income-Producing A	ctivities				
Inter gross amounts unless otherwise indicated		ed business income	Exclude	d by section 512, 513, or 514	
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
1 Program service revenue					(See instructions)
a	_		ļ		
b			<u> </u>		
c	_		_		
d	-				· · · · · · · · · · · · · · · · · · ·
e	-		-		
f	-		 		
g Fees and contracts from government agencies			-	<u> </u>	
2 Membership dues and assessments			 		
3 Interest on savings and temporary cash investments	<u> </u>		 		
4 Dividends and interest from securities			h in Mariana il de		
5 Net rental income or (loss) from real estate					
Debt-financed property Not debt-financed property			 		
• • •			 		
Net rental income or (loss) from personal property Other investment income			18	10,000	
8 Gain or (loss) from sales of assets other than inventory	 		10	10,000	
Net income or (loss) from special events			 		
Gross profit or (loss) from sales of inventory			\vdash		
1 Other revenue a			 		
b			 		
c	-				
d	-				
e					
2 Subtotal Add columns (b), (d), and (e)		0		10,000	C
3 Total. Add line 12, columns (b), (d), and (e)	, , , , , , , , , , , , , , , , , , ,			13	. 10,000
See worksheet in line 13 instructions to verify calculations)				_	
Part XV B Relationship of Activities to the A	ccomplishme	ent of Exempt Pu	rposes	3	
Line No. Explain below how each activity for which income accomplishment of the foundation's exempt purpose.	•			•)
N/A					
	·				
			_		
<u> </u>		·····			
					
					_ ,
	·				
					
					
					
	- 				
					
					
1					

(6) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

X

1b(6)

1c

2013 11/12/2020 12 58 PM Form 990-PF (2019) Juliangel Foundation 47-2570087 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt **Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described Yes No in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash 1a(1) (2) Other assets 1a(2) X 117 **b** Other transactions X (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) X (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5)

d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations Yes X No described in section 501(c) (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge May the IRS discuss this return with the preparer shown below? Sign See instructions X Yes Here

Form 990-PF (2019)

910-323-0191

11/12/20

P01071846

56-1833865

Check If self-employed

President

PTIN

Firm's EIN

Phone no

Preparer's signature
Author Liple allen, CPA, PA

P.A

Paid

Preparer

Use Only

Signature of officer or trustee Print/Type preparer's name

Firm's name

Firm's address

William Temple Allen, CPA, P.A.

William Temple Allen, CPA,

28304

3620 Cape Center Drive

Fayetteville, NC

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

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019

Name of the organization

Employer identification number

Juliangel Fo	undation	47-2570087					
Organization type (check							
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a priva	ate foundation					
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private for	oundation					
	501(c)(3) taxable private foundation						
	covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Ru	ile and a Special Rule See					
General Rule							
_	filing Form 990, 990-EZ, or 990-PF that received, during the year, corpreperty) from any one contributor. Complete Parts I and II. See instructions.	-					
Special Rules							
regulations under se 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ that met the ections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form I that received from any one contributor, during the year, total contribution of (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1h, or (ii) Form 990-EZ, line 1h, or (iii) Form 990-EZ, line 1h, or (iiii) Form 990-EZ, line 1h, or (iiii) Form 990-EZ, line 1h, or (iiiii) Form 990-EZ, line 1h, or (iiiiiiii) Form 990-EZ, line 1h, or (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	n 990 or 990-EZ), Part II, line utions of the greater of (1)					
contributor, during the literary, or education	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 (entering "N/A" in column (b) instead of the contributor name and address), II, and III						
contributor, during the contributions totaled during the year for a	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						
990-EZ, or 990-PF), but it m	at isn't covered by the General Rule and/or the Special Rules doesn't oust answer "No" on Part IV, line 2, of its Form 990, or check the box of certify that it doesn't meet the filing requirements of Schedule B (Form	on line H of its Form 990-EZ or on its					

age 2

Employer identification number Name of organization 47-2570087 Juliangel Foundation Part Contributors (see instructions) Use duplicate copies of Part I if additional space is needed (a) (c) (d) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 1 Suren Paravyan Person 216 Grey Fox Lane **Payroll** 11,300 Noncash \$ NC 28303 Fayetteville (Complete Part II for noncash contributions) (c) (a) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** \$ Noncash (Complete Part II for noncash contributions) (b) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person **Payroll** \$ Noncash (Complete Part II for noncash contributions) (c) (d) (b) (a) Name, address, and ZIP + 4 Total contributions Type of contribution No. Person **Payroll** \$ Noncash (Complete Part II for noncash contributions)

Expenses

Annuity

11/12/2020 12:58 PM

Federal Statements

FYE: 12/31/2019

Statement 5 - Form 990-PF, Part III, Line 3 - Other Increases	
Description	Amount
Rounding	\$1
Total	\$1
Statement 6 - Form 990-	-PF, Part III, Line 5 - Other Decreases
Description	Amount
IRS	\$87
Total	\$87
Form 990-PF, Part XV, Line 1a - N	Managers Who Contributed Over 2% or \$5,000
Name of Manager	Amount
Garnik Ohanian	\$
Total	\$0
Form 990-PF, Part XV, Line 2b -	- Application Format and Required Contents
Description	· ·
In writing	
Form 990-PF, Part XV	/, Line 2c - Submission Deadlines
Description	
None	
Form 990-PF, Part XV, Line	2d - Award Restrictions or Limitations
Description	
None	