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DLN: 93491213002018

2016

OMB No. 1545-0052

## **Return of Private Foundation**

Department of the Treasury Internal Revenue Service

990-PF

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. Open to Public ▶ Information about Form 990-PF and its instructions is at <a href="mailto:www.irs.gov/form990pf">www.irs.gov/form990pf</a>. Inspection For calendar year 2016, or tax year beginning 10-01-2016 , and ending 09-30-2017 A Employer identification number GLENN FOUNDATION FOR MEDICAL RESEARCH INC Number and street (or P O box number if mail is not delivered to street address) ONE EAST WASHINGTON STREET NO 1900 Room/suite B Telephone number (see instructions) (405) 348-8987 City or town, state or province, country, and ZIP or foreign postal code PHOENIX, AZ  $\,\,$  850042554  $\,$ C If exemption application is pending, check here  $\square$  Initial return ☐ Initial return of a former public charity G Check all that apply D 1. Foreign organizations, check here ☐ Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation ☐ Name change Address change E If private foundation status was terminated under section 507(b)(1)(A), check here ✓ Section 501(c)(3) exempt private foundation **H** Check type of organization  $\square$  Section 4947(a)(1) nonexempt charitable trust  $\square$  Other taxable private foundation I Fair market value of all assets at end ✓ Cash ☐ Accrual J Accounting method F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here of year (from Part II, col (c), line 16)▶\$ 213,478,268 Other (specify) (Part I, column (d) must be on cash basis ) Part I Analysis of Revenue and Expenses (The total (d) Disbursements Revenue and Net investment (b) (c) Adjusted net for charitable of amounts in columns (b), (c), and (d) may not necessarily expenses per books purposes (cash basis only) income equal the amounts in column (a) (see instructions) ) Contributions, gifts, grants, etc , received (attach schedule) Check ► ✓ If the foundation is **not** required to attach 2 612 612 Interest on savings and temporary cash investments 2,859,035 4 Dividends and interest from securities 2,859,035 Gross rents 5a Net rental income or (loss) 3,905,829 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 3,905,829 Net short-term capital gain Income modifications . . 10a Gross sales less returns and allowances Less Cost of goods sold . . . . b Gross profit or (loss) (attach schedule) Other income (attach schedule) **چ** 11,136 11,136 12 Total. Add lines 1 through 11 6,776,612 6,776,612 Compensation of officers, directors, trustees, etc 203,334 203,334 13 14 Other employee salaries and wages 15 10.503 0 10.503 Pension plans, employee benefits Operating and Administrative Expenses اروه Legal fees (attach schedule) . 24,298 24,298 <u>쏗</u> 23,411 23,411 Accounting fees (attach schedule) Other professional fees (attach schedule) 64 363 O 64 363 17 ارجه 30,279 30,279 0 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 9,315 9,315 3.590 3,590 20 61,907 21 Travel, conferences, and meetings . 61,907 22 Printing and publications . 23 Other expenses (attach schedule) 1,394,355 1,158,564 235,791 24 Total operating and administrative expenses. Add lines 13 through 23 . . . 1,825,355 559,244 1,266,111 25 Contributions, gifts, grants paid 10.407.461 10.407.461 26 Total expenses and disbursements. Add lines 24 and 12,232,816 10,966,705 1,266,111 27 Subtract line 26 from line 12

Excess of revenue over expenses and

Net investment income (if negative, enter -0-) **Adjusted net income**(If negative, enter -0-)

disbursements

5,510,501

-5,456,204

2,964,934

5,827

15

18,214,799

18,214,814

201,064,098

201.064.098

219,278,912

**∞** 

219,278,912

2,818,921

207,904,934

12,299,567

12,299,567

195,605,367

195.605.367

207,904,934

1

2

3

4

5

6

5,594

2,818,921

213,478,268

5,594

Investments—land, buildings, and equipment basis ▶

Investments—other (attach schedule) . . . . . . .

Less accumulated depreciation (attach schedule) ▶ 105,615

Less accumulated depreciation (attach schedule) ▶

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

Accounts payable and accrued expenses . . . .

Foundations that follow SFAS 117, check here ▶

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

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds

Capital stock, trust principal, or current 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 30 (must agree with end-

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

. . . . . . . . . . . .

**Analysis of Changes in Net Assets or Fund Balances** 

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

Mortgages and other notes payable (attach schedule). . . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . . . . .

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > \_

Other liabilities (describe ▶\_

Temporarily restricted

Permanently restricted .

Unrestricted . . . . . .

and complete lines 27 through 31.

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

Other increases not included in line 2 (itemize) -

Enter amount from Part I, line 27a

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

Decreases not included in line 2 (itemize) ▶

11

12

13

14

15

16

17

18

19

20 21

22

23

24

25

28

29 Net

30

31

Part III

2

3

4

Liabilities

Balances

Fund 26

ō

Assets 27

201.064.098

-5.456.204

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI

5 Multiply line 4 by line 3

instructions

. . . . . . . . . . .

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

8 Enter qualifying distributions from Part XII, line 4

9,150,251

9,205,356

10,966,705

55,105

5

6 7

8

Page 3

Form 990-PF (2016)  Information About Officers, Directors, Trus	stone Foundation Managers Highly Daid F	Page 7
Part VIII and Contractors (continued)	stees, roundation Managers, nighty Paid E	imployees,
3 Five highest-paid independent contractors for professional	l services (see instructions). If none, enter "NO	NE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
KEVIN J LEE	CONSULTING SERVICES	115,680
415 CENTRAL PARK WEST APT 7D NEW YORK, NY 100254812		
	_	
Total number of others receiving over \$50,000 for professional service	es	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. In organizations and other beneficiaries served, conferences convened, research paper.		Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments	s (see instructions)	
Describe the two largest program-related investments made by the foundation		Amount
1		
2		
All other program-related investments See instructions		
3		-
Total. Add lines 1 through 3		• 0
		Form <b>990-PF</b> (2016)

1b

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2

2 Amounts set aside for specific charitable projects that satisfy the 3

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

10.966.705

10.911.600

Form 990-PF (2016)

55.105

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. . . . . . . . . .

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

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

4

5

783.063

9,397,241

Form **990-PF** (2016)

0

Page 9

rt	ΧJ	Ī	į	1	

P	art	ΧI	
	D		

Down VIII Undictwile the d Transpare (see another of the	Form 990-PF (20	016)
Part XIII Undistributed Income (see instructions	Part XIII	Undistributed Income (see instructions)

- Distributable amount for 2016 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2016
- a Enter amount for 2015 only. . . . . . **b** Total for prior years

(a)

Corpus

0

0

(b)

Years prior to 2015

(c)

2015

10,183,642

10,183,642

- Excess distributions carryover, if any, to 2016
- a From 2011. . . . .
- **b** From 2012. . . . c From 2013. . . d From 2014. . . . . e From 2015. . . . .
- f Total of lines 3a through e. . . . . . . .
  - XII, line 4 > \$ 10,966,705
- 4 Qualifying distributions for 2016 from Part a Applied to 2015, but not more than line 2a **b** Applied to undistributed income of prior years
  - (Election required—see instructions). . . . .
  - required—see instructions). . . . . . . . . .

same amount must be shown in column (a) )

**d** Applied to 2016 distributable amount. . . . e Remaining amount distributed out of corpus

5 Excess distributions carryover applied to 2016

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 2015 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . . . . f Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017 . . . . .

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

6 Enter the net total of each column as

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 2011 not

9 Excess distributions carryover to 2017.

10 Analysis of line 9

a Excess from 2012. . . **b** Excess from 2013. . c Excess from 2014. . . . d Excess from 2015. . . e Excess from 2016. . .

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

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

indicated below:

c Treated as distributions out of corpus (Election

Form 990-PF (2016)				Page <b>11</b>
Part XV Supplementary Informa	tion (continued)			
3 Grants and Contributions Paid D	uring the Year or Approve	d for Future	Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	, illioune
a Paid during the year STATEMENT 21 1270 COAST VILLAGE CIRCLE SANTA BARBARA, CA 93108			MEDICAL RESEARCH	10,407,461
Total			▶ 3a	10,407,461
<b>b</b> Approved for future payment				
Total		<u> </u>	▶ 3b	0
				Form <b>990-PF</b> (2016)

Enter gross	s amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
_	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions )
	and contracts from government agencies					
3 Intere	ership dues and assessments					612
	nds and interest from securities.					2,859,035
	ntal income or (loss) from real estate					
	-financed property					
	lebt-financed property					
	ental income or (loss) from personal property					
	nvestment income or (loss) from sales of assets other than					11,136
	tory					3,905,829
	come or (loss) from special events					
LO Gross	profit or (loss) from sales of inventory					
	revenue a					
е						
L2 Subtot	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)		0			6,776,612
L3 Total.	Add line 12, columns (b), (d), and (e)				3	6,776,612
	I-B Relationship of Activities to th		hment of Exem	pt Purposes		
Line No. ▼	Explain below how each activity for which the accomplishment of the foundation's ex	ıncome ıs report	ed in column (e) of	f Part XVI-A contribu		0
3	Instructions ) THE FOUNDATION PRINCIPALLY ENGAGES II	N THE STUDY AN	ND RESEARCH OF T	HF		
<del>,</del> 1	AGING PROCESS THE INCOME EARNED ABO					
<u>.</u> 7	SPECIAL GRANTS, STUDIES AND SCHOLARS					
	1					
	<u>                                     </u>					
						000 BE (2016)

. (20	10)
111	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

Part XVI	Information Re Exempt Organi		nsfers To a	and Transaction	ns and R	lelatio	nships With Nor	ncharitable		
	organization directly or in e Code (other than section							on 501	Yes	No
a Transfers	s from the reporting four	idation to a non-	charitable ex	empt organization	of		-			
<b>(1)</b> Cas	sh							. 1a(1)		No
(2) Oth	er assets							. 1a(2)		No
<b>b</b> Other tra	ansactions									
<b>(1)</b> Sale	es of assets to a nonchar	itable exempt o	rganızatıon.					. 1b(1)		No
<b>(2)</b> Pur	chases of assets from a r	noncharitable ex	empt organiz	zation				1b(2)		No
	ntal of facilities, equipment	-						1b(3)		No
	mbursement arrangemer							. 1b(4)		No
	ns or loan guarantees.							. 1b(5)		No
	ormance of services or m									No
_	of facilities, equipment, r swer to any of the above	-	•							No
of the go	oods, other assets, or ser ansaction or sharing arra (b) Amount involved	vices given by tangement, show	he reporting in column (c	foundation If the	foundation goods, oth	receive ner asse	d less than fair mar	ket value ved	ngemeni	ts
2a Is the fo	undation directly or indir	ectly affiliated w	ith, or relate	d to, one or more	tax-exemp	t organi	zations			
	d in section 501(c) of the	•	•	•		-		🗆 Yes	<b>☑</b> N	0
	complete the following s	,		-(-,(-,,						
,	(a) Name of organizati	on	(1	<b>b)</b> Type of organization	on		(c) Description	of relationship		
of	der penalties of perjury, my knowledge and beliet nich preparer has any kno	f, it is true, corre								
Here	*****			2017-12-31	***	****		May the IRS discu- with the preparer		
	Signature of officer or t	rustee	'	Date	Tıtl	le		see instr )?		
	Print/Type preparer's	s name Pr	reparer's Sıgı	nature	Date		Check if self-	PTIN		
							employed ▶ □	P0000:	.367	
Daid	RAY COPELAND						cilipioyed P			
Paid Proparo	,r									
Prepare Use Onl		ELAND HILD & 1	TROTTER PC					Fırm's EIN ▶73	-12972	94
USE UIII		301 SOUTH BRO	ADWAY SUIT	E 200						
								Phone no (405	) 348-8	3987
	E	DMOND, OK 73	034				'	(403	, = .5 c	,

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, (b) (c) (d) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) Date sold How acquired Date acquired P-Purchase (mo, day, yr) (mo, day, yr) D-Donation SEE STATEMENT 11 S/T CMD Ρ 2016-10-01 2016-09-30 SEE STATEMENT 11 L/T CMD Р 2015-10-01 2016-09-30 SEE STATEMENT 12 S/T PARTNERSHIPS 2016-10-01 2016-09-30 SEE STATEMENT 12 L/T PARTNERSHIPS Р 2015-10-01 2016-09-30 SEE STATEMENT 13 A S/T STOCK 2016-10-01 2016-09-30 SEE STATEMENT 13 A L/T STOCK 2015-10-01 2016-09-30 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h Gain or (loss) (e) Gross sales price Depreciation allowed Cost or other basis (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) (f) 513,170 513,170 769,755 769,755 400,064 -400,064 366,668 366,668 44,471,520 42,127,898 2,343,622 14,674,820 14,362,142 312,678 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 (i) **(1)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (1), if any 513,170 769.755 -400.064 366,668 2,343,622 312,678

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TY 2016 Accounting Fe	ees Sch	edule						
	Name:	GLENN FO	JNDATION FOR M	1EDICAL				
RESEARCH INC								
	<b>EIN:</b> 86-0710305							
Category	Am	ount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			

23,411

23,411

ACCOUNTING FEES

DLN: 93491213002018

Name: GLENN FOUNDATION FOR MEDICAL

RESEARCH INC

**EIN:** 86-0710305

As Filed Data -

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**General Explanation Attachment** Explanation Identifier Return Reference FORM 990 SECTION 1 263(A)-1(F)DE MINIMIS SAFE HARBOR ELECTIONGLENN FOUNDATION FOR MEDICAL PF RESEARCH, INC. IS MAKING THE DE MINIMIS SAFE HARBOR ELECTION UNDER REG. SEC. 1 263 (A)-1(F)

TY 2016 Investments Corporate Stock Schedule	

Name: GLENN FOUNDATION FOR MEDICAL

As Filed Data -

RESEARCH INC

**EIN:** 86-0710305

Name of Stock

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INVESTMENTS CORP. SECURITIES STMT 17

**End of Year Book** 

106,959,887

Value

**End of Year Fair** 

DLN: 93491213002018

TY 2016 Investments -	Other	Schedule
	Name:	GLENN FOUNDATION FOR MEDICAL

DLN: 93491213002018

<b>EIN:</b> 86-0710305						
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value			
OTHER INVESTMENTS - STATEMENT 18	AT COST	2,818,921	2,818,921			

RESEARCH INC

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DL	N: 93491213002018
TY 2016 Legal Fees Schedule	е			_
Name	: GLENN FOU	NDATION FOR MEI	DICAL	
	RESEARCH 1	INC		
EIN	<b>I:</b> 86-0710305			
		•		1
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	24,298	0		24,298

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491213002018		
TY 2016 Other Decreases Schedule					
Name:	GLENN FOUND	DATION FOR MEDICAL			
	RESEARCH IN	С			
EIN:	86-0710305				
De	escription		Amount		
NON-DEDUCTIBLE CLUB DUES & PORTFO	OLIO DEDUCTION	IS	2,528		

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TY 2016 Other Expenses Schedule					
I					
Name:	GLENN FOUNDA	ATION FOR MEDIC	CAL		
	RESEARCH INC				
EIN:	<b>EIN:</b> 86-0710305				
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	

other Expenses benedule		4	4	
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disburse Char Puri

1,394,355

1,158,564

235,791

STATEMENT 16

TY 2016 Other Income Schedule
Name: GLENN FOUNDATION FOR MEDICAL

11,136

DLN: 93491213002018

11,136

11,136

RESEARCH INC **EIN:** 86-0710305

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SEE STATEMENT 20

Other Income Schedule

| Description | Revenue And | Net Investment | Adjusted Net Income | Expenses Per Books | Income |

As Filed Data -

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TY 2016 Other Increases Schedule					
Name:	GLENN FOUND	DATION FOR MEDICAL			
	RESEARCH IN	С			
EIN:	86-0710305				
De	escription		Amount		
ROUNDING				1	

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TY 2016 Other Liabilities Schedule					
Name:	GLENN FOUND	OATION FOR I	MEDICAL		
	RESEARCH IN	С			
EIN:	86-0710305				
Description		Beginning of Year - Book Value	End of Year - Book Value		
STATEMENT 19			18,214,799	12,299,567	

efile GRAPHIC print - DO NOT PR	ROCESS As Filed Data	a -	DL	N: 93491213002018	
TY 2016 Taxes Schedule					
	Name: GLENN FOU	JNDATION FOR ME	DICAL		
	RESEARCH	RESEARCH INC			
<b>EIN:</b> 86-0710305					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
FOREIGN TAXES	18,373	3 18,373		0	
OTHER TAXES	700	700		0	
PAYROLL TAXES	11,206	5 11,206		0	