

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation
Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990PF for instructions and the latest information.



Fo	For calendar year 2022 or tax year beginning , and ending									
Na	ame o	f foundation	A Employer identification number					er		
СН	EB:	IB FOUNDATION				85-1202302				
		and street (or P.O. box number if mail is not delivered to street addres	is)	Room	/suite	B Telephone number (see instructions)				
		Holiday Dr.						,		
		own, state or province, country, and ZIP or foreign postal code					XXXXX tion application is pend	ing about here		
						C ii exemp	tion application is pend	ing, check here		
		nam City, UT 84302								
G	Che	eck all that apply: X Initial return Initial return of a f	ormer public cna	rity		1. Forei	gn organizations, check	c nere		
		Final return Amended return				1	gn organizations meetir	-		
		Address change Name change				check	k here and attach comp	utation		
Н	Che	eck type of organization: X Section 501(c)(3) exempt private found	lation			E If private	foundation status was	terminated under		
\perp		ction 4947(a)(1) nonexempt charitable trust Other taxable priva	ate foundation			section 5	507(b)(1)(A), check here	e <u> </u>		
- 1	Fai	r market value of all assets at J Accounting method: X Cash	Accrua			F If the fou	indation is in a 60-mont	h termination		
	enc	d of year (from Part II, col. (c), Other (specify)				under se	ection 507(b)(1)(B), che	ck here		
	line	2 16) \$ 7,603. (Part I, column (d), must be on cash	basis.)							
Pa	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue	and	(b) Net in	nvestment	(c) Adjusted net	(d) Disbursements		
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses		l ' ' .	ncome	income	for charitable purposes		
		the amounts in column (a) (see instructions).)	book	6				(cash basis only)		
	1	Contributions, gifts, grants, etc., received (attach schedule)	46,7	77.				,		
	2	Check if the foundation is not required to attach Sch. B		•						
	3	Interest on savings and temporary cash investments								
	4	Dividends and interest from securities								
	_	Gross rents								
a)		Net rental income or (loss)								
Revenue		Net gain or (loss) from sale of assets not on line 10								
ŞΕ	_	Gross sales price for all assets on line 6a								
Š	7	Capital gain net income (from Part IV, line 2)								
_	8	Net short-term capital gain								
	9	Income modifications								
		Gross sales less returns and allowances								
		Less: Cost of goods sold								
		Gross profit or (loss) (attach schedule)								
	11	Other income (attach schedule)	4.5. 5							
	12	Total. Add lines 1 through 11	46,7	77.						
	13	Compensation of officers, directors, trustees, etc								
	14	Other employee salaries and wages								
ses	15	Pension plans, employee benefits								
_		Legal fees (attach schedule)								
Operating and Administrative Expe		Accounting fees (attach schedule)	<u> </u>	<u> 17.</u>						
Ş	С	Other professional fees (attach schedule)								
rati	17	Interest								
ist	18	Taxes (attach schedule) (see instructions)		10.						
Ē	19	Depreciation (attach schedule) and depletion								
Adı	20	Occupancy								
E	21	Travel, conferences, and meetings								
g	22	Printing and publications								
Ħ	23	Other expenses (attach schedule)								
er;	24	Total operating and administrative expenses.								
ŏ		Add lines 13 through 23	1	27.						
	25	Contributions, gifts, grants paid						53,183.		
	26	Total expenses and disbursements. Add lines 24 and 25	1	27.				53,183.		
	27	Subtract line 26 from line 12:								
	а	Excess of revenue over expenses and disbursements	46,6	<u>5</u> 0.						
		Net investment income (if negative, enter -0-)								
		Adjusted net income (if negative enter -0-)								

Г	are.co	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Ве	ginning of year		End o	of year		
softv	_ "	should be for end-of-year amounts only. (See instructions.)	(a)	Book Value	(b) Book Va			ir Market va	
	1	Cash – non-interest-bearing		14,137.	7,6	503.		7,603.	
	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							
s s	8	Inventories for sale or use							
ssets	9	Prepaid expenses and deferred charges							
Ä	10a	Investments – U.S. and state government obligations (attach schedule) . $\ . \ .$							
	b	Investments – corporate stock (attach schedule)							
	C	Investments – corporate bonds (attach schedule)							
	11	Investments – land, buildings, and equipment: basis							
		Less: accumulated depreciation (attach schedule)							
	12	Investments – mortgage loans							
	13	Investments – other (attach schedule)							
	14	Land, buildings, and equipment: basis							
		Less: accumulated depreciation (attach schedule)	_						
	15	Other assets (describe)	\square						
	16	Total assets (to be completed by all filers – see the instructions. Also,			_				
		see page 1, item I)		14,137.	7,6	<u>503.</u>		7,603.	
	17	Accounts payable and accrued expenses							
S	18	Grants payable							
lities	19	Deferred revenue							
abil	20	Loans from officers, directors, trustees, and other disqualified persons							
<u> </u>	21	Mortgages and other notes payable (attach schedule)							
	22	Other liabilities (describe)							
	23	Total liabilities (add lines 17 through 22)	<u> </u>						
ances		Foundations that follow FASB ASC 958, check here							
≌		and complete lines 24, 25, 29, and 30.							
<u>8</u>	24	Net assets without donor restrictions							
<u>m</u>	25	Net assets with donor restrictions							
≌		Foundations that do not follow FASB ASC 958, check here							
ī		and complete lines 26 through 30.			_				
ō	26	Capital stock, trust principal, or current funds		14,137.	7,6	503.			
ş	27	Paid-in or capital surplus, or land, bldg., and equipment fund							
ŠŠ	28	Retained earnings, accumulated income, endowment, or other funds							
Ř	29	Total net assets or fund balances (see instructions)		14,137.	7,6	503.			
Net Assets or Fund	30	Total liabilities and net assets/fund balances							
		(see instructions)	<u> </u>	14,137.	7,6	503.			
	art l	, ,				1	<u> </u>		
1		tal net assets or fund balances at beginning of year – Part II, column (a), line 29		-	-	.		14 100	
-	•	ure reported on prior year's return)				1		14,137.	
2		ter amount from Part I, line 27a				2		46,650.	
3		ner increases not included in line 2 (itemize)				3		60 707	
4		d lines 1, 2, and 3				4		60,787.	
5		creases not included in line 2 (itemize) tal net assets or fund balances at end of year (line 4 minus line 5) – Part II, colu	ımın /l-	line 20		6		60,787.	
6	10	iai nei asseis oi tunu balances ai enu oi year (line 4 minus line 5) – Part II, Colul	mini (D)	, 23		ס ן	1	00,/0/.	

		OUNDATION			85-1	202302	
(a) List and	Capital Gains and Losses for Tax on Investment Income (a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (b) How acqui P - Purchas D - Donatio					(d) Date sold (mo., day, yr.)	
1a							
b							
С							
d							
е							
(e) Gross sales pri	ice	(f) Depreciation allowed (or allowable)	,	r other basis nse of sale		n or (loss) f) minus (g))	
а							
b							
С							
d							
Complete and for accept		:- :		20			
		in in column (h) and owned by the fou			1	I. (h) gain minus	
(i) FMV as of 12	/31/69	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		***		ut not less than -0-) or ses (from col. (h))	
a							
b							
С							
d							
e		6 18	1 1 5				
2 Capital gain net inco		If (los	n, also enter in Part s), enter -0- in Par		2		
		ss) as defined in sections 1222(5) and					
•		column (c). See instructions. If (loss	, -	}			
					3		
		on Investment Income (Se			1948— <u> </u>	uctions)	
		escribed in section 4940(d)(2), check)		
		ter: (attach copy			ons) } _1		
		nter 1.39% (0.0139) of line 27b. Exem)		
` ,		col. (b) · · · · · · · · · · · · · · · · · · ·					
		section 4947(a)(1) trusts and taxable			l l		
,	•	section 4947(a)(1) trusts and taxable	•				
5 Tax based on inve6 Credits/Payments:	Sunent inco	me. Subtract line 4 from line 3. If zero	Juliess, enter -U-				
•	navmente and	d 2021 overpayment credited to 2022		6a			
		ax withheld at source					
		nsion of time to file (Form 8868)					
		withheld · · · · · · · · · · · · · · · · · · ·					
- Daonap withholding	S. I S. I SOUSIY			_ Ju			

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7

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10

11

Refunded . .

0.

0.

0.

11 Enter the amount of line 10 to be: Credited to 2022 estimated tax

8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached

OFT	Change Edito
	Month of
	Form 9
WWW CH	Pr. VI
1/2	Market Name

-A	Statements Regarding Activities
F (2022)	CHEBIB FOUNDATION

two	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or		Yes	acker-s
	intervene in any political campaign?	1a		х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the			
	definition	1b		x
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.			
С	Did the foundation file Form 1120-POL for this year?	1c		х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. \$ (2) On foundation managers. \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		х
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict			
	with the state law remain in the governing instrument?	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	7	Х	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	UT			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of			
	each state as required by General Instruction G? If "No," attach explanation	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for			
	calendar year 2022 or the tax year beginning in 2022? See the instructions for Part XIII. If "Yes," complete Part XIII	9		х
0	Did any persons become substantial contributors during the tax year?			
	If "Yes," attach a schedule listing their names and addresses	10	Х	
1	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		х
2	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
3	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address https://chebibfoundation.org/			
4	The books are in care of Louay F. Chebib Telephone no. XXXXXX	XXX	X	
	Located at 770 Holiday Dr Brigham City, UT ZIP+4 84302			
5	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			
6	At any time during calendar year 2022, 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		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country			

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lare.	Statements Regarding Activities for which Form 4720 May Be Required			tra
softw	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	cker-so
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?	1a(1)		_X_
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified			
	person	1a(2)		_X_
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)		_X_
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)		_X_
	(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)?	1a(5)		_X_
	(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.)	1a(6)		_X_
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	1b		
С	Organizations relying on a current notice regarding disaster assistance, check here			
d	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 2022?	1d		_X_
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 2021, did the foundation have any undistributed income (Part XII, lines			
	6d and 6e) for tax year(s) beginning before 2022?	2a		X
	If "Yes," list the years			
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.).	2b		X
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?	3a		X
b	If "Yes," did it have excess business holdings in 2022 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 2022.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		_X_
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2022?	4b		X

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Form 9	F (2022)	CHEBIB	FOUNDATION			85-12	20230	2	Par
Pa	√I-B	Statement	s Regarding Activiti	es for Which Form	n 4720 May Be l			THE REPORT OF THE PERSON OF TH	City
-softwa	During the	year, did the fou	undation pay or incur any am	nount to:				Yes	ocker-
•	(1) Carry o	on propaganda,	or otherwise attempt to influ	ence legislation (section 4	1945(e))?		. 5a(1)		X
	(2) Influen	ce the outcome	of any specific public election	on (see section 4955); or t	to carry on,				
	directly	or indirectly, ar	ny voter registration drive?.				. 5a(2)		X
	(3) Provide	e a grant to an ir	ndividual for travel, study, or	other similar purposes?			. 5a(3)		Х
	(4) Provide	e a grant to an o	organization other than a cha	ritable, etc., organization	described in				
	section	4945(d)(4)(A)?	? See instructions				. 5a(4)		х
	(5) Provide	e for any purpos	se other than religious, chari	table, scientific, literary, or	educational				
			evention of cruelty to childre	•			. 5a(5)		х
b		•	a(1)-(5), did any of the trans						
	-		45 or in a current notice rega				. 5b		
С	-		current notice regarding dis	=					
d	•	, ,	uestion 5a(4), does the found	·					
-			enditure responsibility for the	•			. 5d		
		•	ent required by Regulations	· ·			- 50		
6a	•		the year, receive any funds,	` '	av nremiume				
va		_	act?		ly premiums		. 6a		х
b	•		the year, pay premiums, dire		conal honofit contrac	+2	—		X
b		6b, file Form 88		ectly of indiffectly, off a per	Sorial Deficit Contrac	d:	. 00		^
70		*		arty to a probibited toy ob	olter transportion?		70		v
7a _			year, was the foundation a p						X
b			receive any proceeds or ha				. 7b		
8			the section 4960 tax on pa						7,
Dor			rachute payment(s) during t				. 8	lovo	<u> </u>
Par	t VII		on About Officers, D	irectors, irustees,	Foundation ivi	anagers, Highly Paid	a Emp	loyee	25,
	list all affi	and Contr							
	LIST All OTTI	icers, directors	s, trustees, and foundatio		i -	(d) Contributions to	T		
		(a) Name and a	address	(b) Title, and average hours per week	(c) Compensation (If not paid,	èmployee benefit plans	(e) Expe	ense ad allowa	
				devoted to position	enter -0-)	and deferred compensation	00.	u	
	ay F Cl			Director CEO President					
		xxxxxxxxx	XXXX	.	0.	,			
Rani	la H Cl	hebib		Director	_				
		xxxxxxxxx	XXXX		0.	,			
Fari	ls L Cl	hebib		Director					
xxxxx	XXXXXXX	xxxxxxxxx	XXXX		0.	,			
_				_					
					0.	,			
2	Compensa	ation of five hig	ghest-paid employees (ot	her than those included	on line 1 - see inst	ructions). If none, enter			
	"NONE."					_			
(a) Na	ame and addr	ess of each empl	loyee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expe	ense ad allowa	
NONE	3			-					
NONE	<u> </u>			-					
NONE									
				-					

NONE

NONE

Total number of other employees paid over \$50,000.



F (2022) CHEBIB FOUNDATION

CHEBIB FOUNDATION 85-1202302 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employ and Contractors (continued)

3 Five nignest-paid independent contractors for professional services. Se	e instructions. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
NONE		
NONE		
NONE		
NONE		
Total number of others receiving over \$50,000 for professional services		
Part VIII-A Summary of Direct Charitable Activities		
Cummary of Direct Chantable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant	t statistical information such as the number of	Expenses
organizations and other beneficiaries served, conferences convened, reséarch papers product	ed, etc.	
1 Helping Needy Families: The Helping Needy Fami	lies grant program helps	
families than have been rendered 'in-need', wh	ether by circumstance or	
disaster. The program provides financial suppo	ort for food, housing, etc.	53,183.
2		
		/
3		
4		
Part VIII-B Summary of Program-Related Investments (see	e instructions)	
Describe the two largest program-related investments made by the foundation during the tax y	ear on lines 1 and 2.	Amount
1		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		

Form **990-PF**(2022) UYA



F (2022) CHEBIB FOUNDATION 85-1202302 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations,

	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	
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	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	
6	Minimum investment return. Enter 5% (0.05) of line 5	6	
Part		g four	ndations
	and certain foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part IX, line 6	1	0.
2a	Tax on investment income for 2022 from Part V, line 5	4	
b	Income tax for 2022. (This does not include the tax from Part V.)		
С	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	0.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1	7	0.
Part	XI Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	53,183.
b	Program-related investments – total from Part VIII-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 XII, line 4	4	53,183.
13.74			= 000 DE(0000)

Form **990-PF**(2022)

8	5	-1	.2	0	2	3	0	2
·	J		-	v	~	J	v	4

CAN STO.	Undistributed income (see instruction	is)	· · · · · · · · · · · · · · · · · · ·		A. Itack
0111		(a) Corpus	(b) Years prior to 2021	(c) 2021	(d) 2022
4	Distributable amount for 2022 from Part X, line 7	55.75	, , , , , , , , , , , , , , , , , , ,		
1 2	Undistributed income, if any, as of the end of 2022:				
	• • • • • • • • • • • • • • • • • • • •				
a	Enter amount for 2021 only				
b	Total for prior years:				
3	Excess distributions carryover, if any, to 2022:				
а	From 2017				
b	From 2018				
C	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through e				
4	Qualifying distributions for 2022 from Part XI,				
	line 4: \$ 53,183.				
а	Applied to 2021, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required - see instructions)				
С	Treated as distributions out of corpus (Election				
	required - see instructions)				
d	Applied to 2022 distributable amount				53,183.
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2022				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b				
С	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				
е	Undistributed income for 2021. Subtract line				
	4a from line 2a. Taxable amount - see				
	instructions				
f	Undistributed income for 2022. Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2023				-53,183.
7	Amounts treated as distributions out of corpus				337233
	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 2017 not				
·	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2023.				
J	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:				
	Excess from 2018				
a	Excess from 2019				
b	Excess from 2020				
C					
d	Excess from 2021				
е	Excess from 2022				

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orm 9	F (2022) CHEBIB FOUNDATI				85-12	02302 2 396
Pare	Private Operating Foundati	'		<u> </u>		THE CONTRACT
a d	If the foundation has received a ruling or dete	ermination letter that	it is a private operating	g foundation, and		cker-
	the ruling is effective for 2022, enter the date	of the ruling				
b	Check box to indicate whether the foundation	is a private operatir	ng foundation describe	ed in section	4942(j)(3)	or 4942(j)(5)
2a	Enter the lesser of the adjusted net income	Tax year		Prior 3 years	I	(e) Total
	from Part I or the minimum investment	(a) 2022	(b) 2021	(c) 2020	(d) 2019	(5)
	return from Part IX for each year listed					
b	85% (0.85) of line 2a					
С	Qualifying distributions from Part XI, line 4,					
	for each year listed					
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
е	Qualifying distributions made directly for					
	active conduct of exempt activities.					
•	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative					
•	test relied upon: "Assets" alternative test – enter:					
а						
	(1) Value of all assets					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test–enter 2/3 of					
	minimum investment return shown in Part IX, line 6, for each year listed					
С	"Support" alternative test - enter:					
·	(1) Total support other than gross invest-					
	ment income (interest, dividends, rents,					
	payments on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public and 5 or					
	more exempt organizations as provided					
	in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an					
	exempt organization					
	(4) Gross investment income					
art	XIV Supplementary Information			e foundation ha	ad \$5,000 or mo	re in assets at
	any time during the year- s	ee instructions	s.)			
1 I	nformation Regarding Foundation Manage	ers:				
	ist any managers of the foundation who have			ributions received by	the foundation before	the close of any
t	ax year (but only if they have contributed more	than \$5,000). (See	section 507(d)(2).)			
	ist any managers of the foundation who own 1			or an equally large po	ortion of the ownership	o of a partnership
C	or other entity) of which the foundation has a 10	0% or greater interes	SI.			
2 1	nformation Regarding Contribution, Grant	Gift Loan Schol	archin ata Bragram	ne:		
	Check here X if the foundation only make				not accent unsolicite	ad requests for
	unds. If the foundation makes gifts, grants, etc			-		
	unds. If the roundation makes girts, grants, etc	o., to marviduais or o	rgariizations under oth	ici conditions, compic	oto itomo za, b, c, anc	a. Occ manachons.
a 7	The name, address, and telephone number or	email address of the	person to whom appli	cations should be ad	dressed:	
	-,, .		,			
b 7	he form in which applications should be subm	nitted and information	n and materials they sl	hould include:		
			•			
c /	Any submission deadlines:					

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

85-1202302



		1		
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	
a Paid during the year				
none				
770 Holiday dr.				
Brigham City, UT 84302		NC	Families in need	53,183.
· ·				-
				,
Total				53,183.
b Approved for future payment				
Total			 	
I OTAL			3h	i

Form **990-PF**(2022)

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oftwa	yros	s amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by sect	ion 512, 513, or 514	(e)
1	Prog	gram service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
	а	·					
	b						
	С						
	d						
	е						
	f						
_	-	Fees and contracts from government agencies					
2		nbership dues and assessments					
3		rest on savings and temporary cash investmentsdends and interest from securities.					
4							
5		rental income or (loss) from real estate: Debt-financed property					
		Not debt-financed property					
6		rental income or (loss) from personal property					
7		er investment income.					
8		n or (loss) from sales of assets other than inventory					
9		income or (loss) from special events					7
10		ss profit or (loss) from sales of inventory					
11	Othe	er revenue: a					
	c _						
	d						
	е_						
12	Sub	total. Add columns (b), (d), and (e)					
13	Tota	al. Add line 12, columns (b), (d), and (e)				13	
		ksheet in line 13 instructions to verify calculations.)					
	rt X\	-					
Lin	e No.	Explain below how each activity for which income is					mplishment
		of the foundation's exempt purposes (other than by	providing funds	for such purposes)	. (See instruction	S.)	



F (2022) CHEBIB FOUNDATION

CHEBIB FOUNDATION 85-1202302 Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

1	Did th	e organization direc	tly or indire	ctly engage i	n any of the followir	ng with any oth	er organizat	ion described	in section 50	1(c)	_	162	NO
	(other	than section 501(c)(3) organiz	ations) or in	section 527, relating	g to political or	ganizations	?					
а					haritable exempt or						4 - (4)		v
	` '										1a(1)		X
											1a(2)		X
b		transactions:		la aa.a.	!						45(4)		v
					ganization						1b(1)		X
					empt organization .								X
	` '	•			8						1b(3)		X
			•								1b(4)		X
		_									$\overline{}$		<u> </u>
					ındraising solicitatio								X
С				-	er assets, or paid er						1c		X
d					ete the following sch			-			_		
			-	-	undation. If the four			fair market va	alue in any tra	nsaction	or sharir	ng	
					goods, other asset								
(a) Line	e no. (b) Amount involved	(c) N	lame of nonch	aritable exempt orgar	nization	(d) Descr	iption of transfe	ers, transaction	s, and sha	aring arra	ngeme	ents
							A 4						
										W			
	(other	than section 501(c)(3)) or in so lowing sche	ection 527?.	h, or related to, one					· · · `Ĺ	Yes	X	No
		(a) Name of org	anization		(b) Type	of organizatio	n	(c)	Description o	t relations	ship		
	T 11a	des pendition of perions	I de eleve thet	I hava avaninad	this return including on		lulas and atata		hoot of many leader	الممم مملاما	aliaf itia		
					this return, including acon taxpayer) is based on a				_ · F	May the IRS			ırn with
Sign					1					the prepare	r shown be		
Here	<u></u>						ESIDE	1T	[instructions			
	Si	gnature of officer or to			Date	Title		Ta .			Ye	s	No
Paid		Print/Type preparer'	s name		Preparer's signatu	re		Date	Check	if	PTIN		
Prepa	rer								self-en	nployed			
Use C		Firm's name							Firm's EIN				
	,	Firm's address							Phone no.				

Form **990-PF**(2022) UYA



Schedule of Contributors

OMB No. 15. 1047 colling to the state of the

Attach to Form 990 or Form 990-PF.

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

Employer identification number Name of the organization CHEBIB FOUNDATION 85-1202302 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33^{1/3} % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13. 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Employer identification no

85-1202302

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	Khaled L Chebib XXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXX	\$15,010.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>2</u>	Farouk S Chebib XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	\$10,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>3</u>	Laila Chebib XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	\$ 17,030.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Name, address, and zir + 4	\$	Person Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.

organization

Employer identification in 85–1202302

art II Noncash (see instructions). Use duplicate copies of Part II if additional space is needed.

	, , , , , ,	· · · · · · · · · · · · · · · · · · ·	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	<u> </u>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
—			
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
Ţ			
		\$	

Employer identification n

85-1202302

Part III Exclusively relig

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) \$

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Trans	sfer of gift	
	Transferee's name, address	s, and ZIP + 4	Relatio	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	e of gift	(d) Description of how gift is held
		(e) Trans	sfer of gift	
	Transferee's name, address	s, and ZIP + 4	Relatio	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Trans	sfer of gift	
	Transferee's name, address	s, and ZIP + 4	Relatio	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Trans	sfer of gift	
	Transferee's name, address	s, and ZIP + 4	Relatio	nship of transferor to transferee

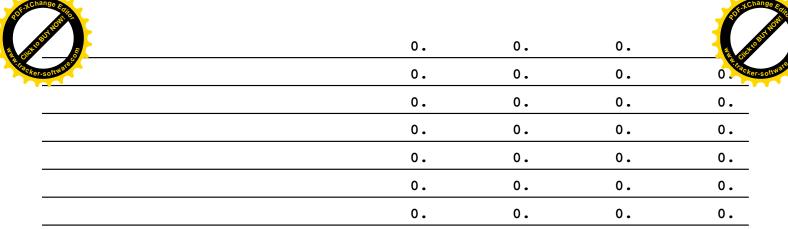




Form 990-PF Professional Fees Expense

Supporting Details for Form 990-PF, Part I, Line 16

(a) Description	(b) Revenue and expenses per books	(c) Net investmen income	t (d) Adjusted net income	(e) Disbursement for charitable purpose
Legal fees:				
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
Accounting fees:				
taxact	117.	0.	0.	0.
	0,	0.	0.	0.
-	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
Other professional fees:				
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	05/02/23 11	: 30AM		



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Form 990-PF Taxes Expenses

Supporting Details for Form 990-PF, Part I, Line 18

(a) Description	(b) Revenue and expenses per books			(e) Disbursement for charitable purpose
Utah registation	10.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.





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Form 990-PF Substantial Contributors

Supporting Details for Form 990-PF. Part VI-A, Line 10

(a) Name (enter either the person's name or t business's name	he	(b) Address	
Person Khaled Chebib	Street address XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	xxxxxx	Room or suite no.
Business	City, town or post office XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	State XXXXXXX XX Foreign province/count	ZIP Code XXXXX y Foreign
Person	Street address		Room or suite no.
Business	City, town or post office	State	ZIP Code
	Foreign country	Foreign province/county	Foreign postal code
Person	Street address		Room or suite no.
Business	City, tow n or post office	State	ZIP Code
FFII	Foreign country	Foreign province/county	Foreign postal code
Person	Street address		Room or suite no.
Business	City, town or post office	State	ZIP Code
	Foreign country	Foreign province/county	Foreign postal code
Person	Street address		Room or suite no.
Business	City, town or post office	State	ZIP Code
	Foreign country	Foreign province/county	Foreign postal code
Person	Street address		Room or suite no.

, , , , , , , , , , , , , , , , , , ,			
Business	City, town or post office	State	ZIP Code
	Foreign country	Foreign province/county	Foreign postal code
Person	Street address		Room or suite no.
Business	City, town or post office	State	ZIP Code
	Foreign country	Foreign province/county	Foreign postal code
Person	Street address		Room or suite no.
Business	City, town or post office	State	ZIP Code
	Foreign country	Foreign province/county	Foreign postal code
Person	Street address		Room or suite no.
Business	City, town or post office	State	ZIP Code
	Foreign country	Foreign province/county	Foreign postal code
Person	Street address	,()	Room or suite no.
Business	City, town or post office	State	ZIP Code
	Foreign country	Foreign province/county	Foreign postal code