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Form **990-PF** Department of the Treasury Internal Revenue Service

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052

	foundation		, and ending	A Employer identification	on number
1 44116 0	TOURIGEROIT			A Employer identification	on namoei
PHI	LIP & REBECCA HOCHMAN FO	OUNDATION		20-277726	8
	and street (or P O box number if mail is not delivered to street a		Room/suite	B Telephone number	-
P.0	. BOX 1936			650-366-7	705
	own, state, and ZIP code			C If exemption application is	
	ALTOS, CA 94023				
Chect	call that apply: Initial return	Initial return of a fori	mer public charity	D 1. Foreign organizatio	ns, check here
	Final return	Amended return		Foreign organizations i	meeting the 85% test
	Address change	Name change		Foreign organizations in 2. check here and attach	computation
_	x type of organization; X Section 501(c)(3) ex			E If private foundation s	
	ection 4947(a)(1) nonexempt charitable trust (arket value of all assets at end of year J Accountin	Other taxable private foundating method: X Cash	Accrual	under section 507(b)(• • •
	·	ner (specify)	Accidal	F If the foundation is in under section 507(b)(
▶\$	5,777,015. (Part I, colur		asis.)	dider section sor(b)	1)(D), CHECK HEIC
	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	necessarily equal the amounts in column (a), (c), and (d) may not necessarily equal the amounts in column (a).)	expenses per books	income	income	for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received			N/A	
2	Check X if the foundation is not required to attach Sch B				
3	Interest on savings and temporary cash investments	215.	215.		STATEMENT 1
4	Dividends and interest from securities	127,308.	127,308.		STATEMENT 2
	Gross rents			-	
6	Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10	31,972.			
يّ عَو	Gross sales price for all	<u> </u>		<u> </u>	
Revenue 2	Capital gain net income (from Part IV, line 2)		31,972.	<u> </u>	
ع ع	Net short-term capital gain		,		
9	Income modifications				
108	Gross sales less returns and allowances				
	Less Cost of goods sold				
- 1	Gross profit or (loss)	FF 0.65			
1	Other income	55,863.	<u>52,860.</u>		STATEMENT 3
12	Total Add Ined V Appropri 11 Compensation of officera, directors, trustees, etc	215,358. 0.	<u>212,355.</u> 0.		
Д	Other employee salaries and wages	U •		· <u> </u>	0
\$\$ \$\$	Pension plans, lemployee benefits				
<u>نازی</u>	Legalfees STMT 4	1,635.	0.		1,635
ä l.	Copyring Feet 1 7 STMT 5	11,000.	0.		11,000
<u></u> -	Other-professional tees STMT 6	10,713.	10,713.		0
Administrative 12 0 12 12 12 12 12 12 12 12 12 12 12 12 12	Interest				
18	Taxes STMT 7	3,104.	3,094.		0
을 19 20	Depreciation and depletion				
필 20 전 21	Occupancy Travel, conferences, and meetings				
P 22	Printing and publications				
E 23	Other expenses STMT 8	50.	0.		50
Operating 24	·	30.			1
e e	expenses. Add lines 13 through 23	26,502.	13,807.		12,685
Ō ₂₅	Contributions, gifts, grants paid	281,000.			281,000
26	Total expenses and disbursements.				
\bot	Add lines 24 and 25	307,502.	13,807.		293,685
27	Subtract line 26 from line 12:				
	Excess of revenue over expenses and disbursements	<92,144.>			
- 1	Net investment income (if negative, enter -0-)		198,548.		<u> </u>
	C Adjusted net income (if negative, enter -0-) LHA For Paperwork Reduction Act Notice, see		<u> </u>	N/A	Form 990-PF (2011

Pi	art I	Balance Sheets Action School be for end-of-year amounts only	t a Section (see	(A. D1. Volume	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
-		Cash - non-interest-bearing	116,321.	197,109.	197,109.
- 1		Savings and temporary cash investments			
ĺ		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			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
s	8	Inventories for sale or use			
Assets	_	Prepaid expenses and deferred charges			
As		Investments - U.S. and state government obligations			
		Investments - corporate stock			
	1	·			
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
		Investments - mortgage loans	6 065 404	5 4 4 4 0 5 4	- FEE 006
	13	Investments - other STMT 9	6,267,181.	6,141,061.	<u>5,579,906.</u>
	14	Land, buildings, and equipment: basis ▶			
		Less accumulated depreciation			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers)	6,383,502.	6,338,170.	5,777,015.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Ø	19	Deferred revenue			
Liabilities	1	Loans from officers, directors, trustees, and other disqualified persons			
혍		Mortgages and other notes payable			
Ë		Other liabilities (describe >)		·····	
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.		•	
ces	24	Unrestricted			
a	25	Temporarily restricted			
Fund Balan	26	Permanently restricted			
5	1	Foundations that do not follow SFAS 117, check here			
ŏ	l	and complete lines 27 through 31.		_	
ţ	27	Capital stock, trust principal, or current funds	0.	0.	
SSE	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	6,383,502.	6,338,170.	
ž	30	Total net assets or fund balances	6,383,502.	6,338,170.	
_	31	Total liabilities and net assets/fund balances	6,383,502.	6,338,170.	
F	art	Analysis of Changes in Net Assets or Fund B	alances		
=			 	· · · · · · · · · · · · · · · · · ·	
1		I net assets or fund balances at beginning of year - Part II, column (a), line	3 U		6 202 EAD
_	•	st agree with end-of-year figure reported on prior year's return)		1	6,383,502.
_		r amount from Part I, line 27a		2	<u> </u>
3		ir increases not included in line 2 (itemize) BOOK/TAX DI	FFERENCES	3	46,812.
4		lines 1, 2, and 3		4	6,338,170.
		reases not included in line 2 (itemize)		5	0.
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b) line 30	اءا	6.338.170.

PHILIP & REBECCA HOCHMAN FOUNDATION

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Form **990-PF** (2011)

Form 990-PF (2011)

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Form 990-PF (2011) PHILIP & REBECCA HOCHMAN FOUNDATION Part IV Capital Gains and Losses for Tax on Investment Income

20-2777268

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(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)					l P			(c) Date a (mo., da		(d) Date sold (mo., day, yr.)	
1a						<u> </u>					
b SEE	ATTACHED	STAT	EMENT		- 						
C .						<u> </u>					
d	 				- - · · · · · · · · · · · · · · · · · ·	┼					
e (e) Gross	sales price	(f) C	epreciation allowed (or allowable)		t or other basis	-				ain or (loss (f) minus	
			(or anomable)	pius c.	Apolisc of Sale				(c) plus	(1) 11111111111111111111111111111111111	(8)
<u>a</u> b											
C				,						-	
d											
e	261,562.				229,59	0.					31,972
		ng gain in i	column (h) and owned by	the foundation				(1)	Gains (C	ol. (h) gain	
(i) F.M.V. a	s of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any				(k), but r	not less tha (from col. (n -0-) or
a											
b											
C											
d											
е											31,972
2 Capital gain n	et income or (net ca	apital loss)	If gain, also ente			}	2				31,972
3 Net short-term	n capital gain or (lo:	ss) as defi	ned in sections 1222(5) ar	nd (6):		_	1				
	nter in Part I, line 8,			.0 (0).		Ĵ					
	r -0- in Part I, line 8		ection 4940(e) for				3	<u> </u>		N/A	1
If "Yes," the found	dation does not qua	lity under	tax on the distributable an	omplete this pa	ırt.						Yes X No
1 Enter the app	(a)	each colu	mn for each year; see instr	uctions before	making any enu				Ŧ		(d)
Bas Calendar year	se periód years	וחם וח)	(b) Adjusted qualifying dis	stributions	Net value of n	c) oncha		use assets		Distri	bútión ratio
Calefidal year	(or tax year beginni 2010	ווו עווו		7,221.				2,087	(0011 (0) 0111000 0) 0011		.05029
	2009			4,125.				3,880			.03086
	2008			1,145.				2,224			.06572
	2007			5,976.				5,110			.08057
	2006		13	6,716.		- 6	,74	6,081			.02026
2 Total of line 1	L column (d)								2		.24771
		5-year had	se period - divide the total	on line 2 by 5	or by the numbe	r of v	ears		-	 	• 2 3 1 1 1
•	n has been in existe	-	•		or by the numbe	. UI y	5413		3		.04954
4 Enter the net	value of noncharita	ble-use as	sets for 2011 from Part X,	line 5					4		5,847,180
5 Multiply line 4	4 by line 3								5		289,687
6 Enter 1% of n	iet investment incoi	me (1% of	Part I, line 27b)		-				6		1,985
7 Add lines 5 ai	nd 6								7		291,672
8 Enter qualify:	ng distributions fro	m Part XII,	, line 4						8		293,685
	ual to or greater tha VI instructions.	n line 7, cl	neck the box in Part VI, line	e 1b, and comp	plete that part us	ng a	1% tax	rate.			

	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49		- see ins			s)
	Exempt operating foundations described in section 4940(d)(2), check here \(\bigs\) and enter "N/A" on line 1.	1				
	Date of ruling or determination letter:					
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1		1	.,98	85.
Ü	of Part I, line 27b		<u> </u>		., ,	<u> </u>
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	ļ			0.
	Add lines 1 and 2	3			, 91	
_	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			<u> </u>	0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		-	1,9	
	Credits/Payments:	J			., ,	<u> </u>
	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 12,191.					
	Exempt foreign organizations - tax withheld at source					
	Tax paid with application for extension of time to file (Form 8868) 6c					
	· · · · · · · · · · · · · · · · · · ·					
		7		1 .	2,1	۵1
	Total credits and payments. Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	8	 		<u> </u>	<u> </u>
		9	 			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Overpayment, If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			1 (0,2	06
		10	 	<u> </u>	<u>, </u>	00.
	Enter the amount of line 10 to be: Credited to 2012 estimated tax 10,206. Refunded rt VII-A Statements Regarding Activities	11	<u>1</u>			<u> </u>
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın.	$\neg \neg$		Yes	No
14			-	1a		X
	any political campaign? Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		-	1b		X
U	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	od or	-	••		
	distributed by the foundation in connection with the activities.	eu ui		ľ		
_	Did the foundation file Form 1120-POL for this year?			1c		х
	·		-	10		
u	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$\bigsim \text{\$0.} \text{ (2) On foundation managers. } \bigsim \text{\$0.}\$		İ	İ		
_	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	•				
e	managers. > \$ 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		х
2	If "Yes," attach a detailed description of the activities.		⊢	٠.		
•	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	. r				
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	,,		3		x
A a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		F	4a	X	
	of "Yes," has it filed a tax return on Form 990-T for this year?		-	4b	X	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		1	5		Х
•	If "Yes," attach the statement required by General Instruction T.		<u> </u>	<u> </u>	-	-
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	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?		-	7	X	
•	If "Yes," complete Part II, col. (c), and Part XV.		-	•		
8.8	Enter the states to which the foundation reports or with which it is registered (see instructions)					
•	CA					
,	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
٠	of each state as required by General Instruction G? If "No," attach explanation			8b	X	1
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call	endar				
٠	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		x
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses			10		X

	990-PF (2011) PHILIP & REBECCA HOCHMAN FOUNDATION 20-2777	<u> 268</u>	F	² age 5
Pa	rt VII-A Statements Regarding Activities (continued)			
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?	13	Х	
	Website address ► N/A			
14	The books are in care of ► SARAH BLATNER Telephone no. ► 650-36	6-7	705	
	Located at ▶ 1890 STOCKBRIDGE AVENUE, REDWOOD CITY, CA ZIP+4 ▶94			
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<u> </u>	
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16	i	X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign			
	country			
Pa	rt VII-B 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.		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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(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			ì
	termination of government service, if terminating within 90 days.)			
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
٠	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	16		
	Organizations relying on a current notice regarding disaster assistance check here	U		
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
٠	before the first day of the tax year beginning in 2011?	1c		х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	16		
_	defined in section 4942(j)(3) or 4942(j)(5)):			
2	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
•	before 2011?			
	if "Yes," list the years \(\bigs_{}\), \(\)			
h	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		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	20		
٠	>			
3.0	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
74	during the year? X Yes No			
h	If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after			
J	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 Schedule C,	2.		v
4-	Form 4720, to determine if the foundation had excess business holdings in 2011)	3b		X
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
0	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	۱		T.
	had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b_		X

4b X Form **990-PF** (2011)

Form 990-PF (2011) PHILIP & REICA HOCHMAN Part VII-B Statements Regarding Activities for Which F	FOUNDATION	Required (control	20-27772	68 Page 6
 5a During the year did the foundation pay or incur any amount to: Carry on propaganda, or otherwise attempt to influence legislation (section 2) Influence the outcome of any specific public election (see section 4955); or any voter registration drive? Provide a grant to an individual for travel, study, or other similar purposes? Provide a grant to an organization other than a charitable, etc., organization 509(a)(1), (2), or (3), or section 4940(d)(2)? Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals? If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und section 53.4945 or in a current notice regarding disaster assistance (see instrue Organizations relying on a current notice regarding disaster assistance check his clif the answer is "Yes" to question 5a(4), does the foundation claim exemption for expenditure responsibility for the grant? "Yes," attach the statement required by Regulations section 53.4945 Did the foundation, during the year, receive any funds, directly or indirectly, to provide a statement required by first and further transactions. 	4945(e))? I to carry on, directly or indirectly or indirectly or indirectly or indirectly or indirectly or indirectly or described in section or educational purposes, or factorial described in sections described in sections. The exceptions described in the exception described in the exception described i	Ye ectly, Ye Ye Ye	8 X No 8 X No 8 X No 8 X No	5b X
a personal benefit contract?		☐ Ye	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p if "Yes" to 6b, file Form 8870.	ersonal benefit contract?			6b X
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	☐ Ye	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Part VIII Information About Officers, Directors, Trustored Paid Employees, and Contractors	ees, Foundation Ma	ınagers, Highly	<i>'</i>	
1 List all officers, directors, trustees, foundation managers and their	compensation.	, <u>, , , , , , , , , , , , , , , ,</u>		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deterred compensation	(e) Expense account, other allowances
SEE STATEMENT 10		0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter "NONE."	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	account, other
NONE				
Total number of other employees paid over \$50,000				0

Part VIII Part V	ation Managers, Highly	///200 Page/
3 Five highest-paid independent contractors for professional services. If none, enter	r "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	 	
Fotal number of others receiving over \$50,000 for professional services Part X-A Summary of Direct Charitable Activities		>
List the foundation's four largest direct charitable activities during the tax year. Include relevant stati number of organizations and other beneficiaries served, conferences convened, research papers pro	stical information such as the	Expenses
	Sacration, otto.	
1 <u>N/A</u>		
2		<u> </u>
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year of	n lines 1 and 2.	Amount
1 <u>N/A</u>		
		·
2		
		
All other program-related investments. See instructions.		
3		
Table Add lines 4 Abranish 2	•	0
Total, Add lines 1 through 3		<u> </u>

Form **990-PF** (2011)

Pa	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	5,804,954.
	Average of monthly cash balances	1b	131,269.
	Fair market value of all other assets	10	
	Total (add lines 1a, b, and c)	1d	5,936,223.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	5,936,223.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	89,043.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	5,847,180.
6	Minimum investment return. Enter 5% of line 5	6	292,359.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	292,359.
2a	Tax on investment income for 2011 from Part VI, line 5		_
þ	Income tax for 2011. (This does not include the tax from Part VI.)]	
C	Add lines 2a and 2b	2c	1,985.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	290,374.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	290,374.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	290,374.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	293,685.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	<u> </u>
3	Amounts set aside for specific charitable projects that satisfy the:		
a	- " ' '	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	<u> 293,685.</u>
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		=
	income. Enter 1% of Part I, line 27b	5	1,985.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	291,700.

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

Form **990-PF** (2011)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI, line 7		· · ·		290,374.
2 Undistributed income, if any, as of the end of 2011				<u> </u>
a Enter amount for 2010 only			2,963.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2011:				<u> </u>
a From 2006				
b From 2007				
c From 2008				
d From 2009	1			
e From 2010	_			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2011 from	}			
Part XII, line 4: ► \$ 293,685.				
a Applied to 2010, but not more than line 2a			2,963.	_
b Applied to undistributed income of prior		_		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2011 distributable amount	240			290,374.
e Remaining amount distributed out of corpus	348.			
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	348.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
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		0.		
d Subtract line 6c from line 6b. Taxable			•	
amount - see instructions		0.		
e Undistributed income for 2010. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2011. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2012				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			···
8 Excess distributions carryover from 2006				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2012.	240			
Subtract lines 7 and 8 from line 6a	348.			······································
10 Analysis of line 9:				
a Excess from 2007				
b Excess from 2008				
c Excess from 2009 d Excess from 2010				
e Excess from 2011 348.		··	<u> </u>	5 000 DE (0044)

Form 990-PF (2011) PHILIP Part XIV Private Operating F	& REBECCA H				77268 Page 10
——————————————————————————————————————			1-A, question 9)	N/A	
1 a If the foundation has received a ruling of		· · · · ·			
foundation, and the ruling is effective for	•	-		14040(3)(2) 25 140	942(j)(5)
b Check box to indicate whether the foun		ng toundation described	Prior 3 years	4942(j)(3) or4	1
2 a Enter the lesser of the adjusted net	Tax year (a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
income from Part I or the minimum	(4) 2011	(0) 2010	(6) 2005	(4) 2000	(0) 10.01
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed			 	-	
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities e Qualifying distributions made directly				- 	
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					<u> </u>
alternative test relied upon:					
a "Assets" alternative test - enter: (1) Value of all assets					
• •					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross	İ				
investment income (interest, dividends, rents, payments on					
securities loans (section	İ				
512(a)(5)), or royalties)	<u></u>				
(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					<u> </u>
(4) Gross investment income			10.11		<u> </u>
Part XV Supplementary Info			if the foundation	on had \$5,000 or m	ore in assets
at any time during	tne year-see insi	tructions.)			,
1 Information Regarding Foundati	-				
a List any managers of the foundation w year (but only if they have contributed			ntributions received by the	ne foundation before the cl	ose of any tax
SEE STATEMENT 11					
b List any managers of the foundation w other entity) of which the foundation h			ı (or an equally large por	tion of the ownership of a	partnership or
NONE			=		
2 Information Regarding Contribu	tion, Grant, Gift, Loai	n, Scholarship, etc., F	Programs:		
Check here X if the foundation the foundation makes gifts, grants, etc.	only makes contributions	s to preselected charitable	e organizations and does		
a The name, address, and telephone nur	·				
a The hame, addition, and tolephone has	moor or the person to whi	om applications should b	o 200,00000.		
b The form in which applications should	he submitted and inform	ation and materials they	sporid include.		
c Any submission deadlines:					
d Any restrictions or limitations on awar	ds, such as by geographi	cal areas, charitable field	s, kinds of institutions, o	or other factors:	
					5 000 DT
123601 12-02-11					Form 990-PF (2011)

PHILIP & REBECCA HOCHMAN FOUNDATION Form 990-PF (2011) Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount contribution any foundation manager status of Name and address (home or business) recipient or substantial contributor a Paid during the year FUND 501(C)(3) ANTI-DEFAMATION LEAGUE NONE RAISING/DISTRIBUTION -605 THIRD AVENUE NEW YORK, NY 10158-3560 ADD'L INFO. AVAILABLE 10,000. NONE 501(C)(3) FUND TAUBE-KORET CAMPUS FOR JEWISH LIFE RAISING/DISTRIBUTION -121 STEUART STREET SAN FRANCISCO, CA 94105 ADD'L INFO, AVAILABLE UΡ 50,000. NONE 501(C)(3) FUND GIDEON HAUSNER JEWISH DAY SCHOOL RAISING/DISTRIBUTION -450 SAN ANTONIO ROAD ADD'L INFO, AVAILABLE PALO ALTO, CA 94306 5,000. ΠP DOCTORS WITHOUT BORDERS NONE 501(C)(3) FUND RAISING/DISTRIBUTION -333 7TH AVENUE, 2ND FLOOR ADD'L INFO. AVAILABLE NEW YORK, NY 10001-5004 20,000. TP 501(C)(3) FUND PARTERMA USA NONE RAISING/DISTRIBUTION -77 SEVENTH AVE STE 10-A ADD'L INFO. AVAILABLE NEW YORK, NY 10011-6622 15 000. SEE CONTINUATION SHEET(S) **▶** 3a 281 000 Total **b** Approved for future payment NONE

▶ 3b

Total

Form **990-PF** (2011)

Analysis of Income-Producing Activities Part XVI-A

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		led by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
	Code		2000		
a		_	-		
D	1		 		
<u> </u>					
d					
e	 				
		 	 		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash	1		اما		
investments			14	215.	
4 Dividends and interest from securities			14	127,308.	
5 Net rental income or (loss) from real estate:					·
a Debt-financed property			.		
b Not debt-financed property			<u> </u>		
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other		· · · · · · · · · · · · · · · · · · ·			
than inventory	1		14	6,626.	25,346.
9 Net income or (loss) from special events			1 - 1	0,0201	23,3401
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a PARTNERSHIP INCOME	523000	3,003.	14	52,860.	
b				32,000.	
c					
d					
e				-	
12 Subtotal. Add columns (b), (d), and (e)		3,003.		187,009.	25,346.
13 Total. Add line 12, columns (b), (d), and (e)			11	13	
(See worksheet in line 13 instructions to verify calculations.)				·* —	
Part XVI-B Relationship of Activities t	o the Acco	omplishment of Ex	(emp	t Purposes	
Explain below how each activity for which inco the foundation's exempt purposes (other than	me is reported i by providing fui	n column (e) of Part XVI-A	contrib	uted importantly to the accom	plishment of
N/A		, , , , , , , , , , , , , , , , , , , ,			
		···			
			-		
					
					
		···			
	· ·			· · · · · · · · · · · · · · · · · · ·	
	 				
					
				· -	
	<u> </u>				·
123821 12-02-11					Form 990-PF (2011)

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1) PHILIP & REBECCA HOCHMAN FOUNDATION 20-2777268
Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Part XVII

Dia the	organization directly or indire	actiy engage in any o	gniwoilot ent to) with any other organization	n described in secti	on 501(c) of	1 1	162	140
the Cod	e (other than section 501(c)((3) organizations) oi	r in section 527	7, relating to political organi	zations?		i 1		
a Transfe	rs from the reporting founda	tion to a noncharital	ole exempt org	anization of:					
(1) Cas	sh						1a(1)		<u>X</u>
(2) Oth	er assets						1a(2)		_X_
b Other tr	ansactions:							l	
(1) Sal	es of assets to a noncharitab	ole exempt organizat	ion				1b(1)	j	_X_
(2) Pu	rchases of assets from a non	icharitable exempt o	rganization				15(2)		X
(3) Re	ntal of facilities, equipment, o	or other assets					1b(3)		X X X
(4) Re	mbursement arrangements						1b(4)		X
	ans or loan guarantees						1b(5)		X
	formance of services or mei	mbership or fundrai	sing solicitation	ns			1b(6)		X
	of facilities, equipment, mai	•	-				1c		X
	nswer to any of the above is '				vavs show the fair m	narket value of the goods, o		.ets.	
	ces given by the reporting fo		_	• •	•			,	
	(d) the value of the goods, o			o lood than tall market value	o in any a anoaoiion	or origining arrangement, o			
Line no	(b) Amount involved			exempt organization	(d) Description	of transfers, transactions, and	sharing an	rangeme	
<u>, , , , , , , , , , , , , , , , , , , </u>	(c) randani mende	(0) (04)	N/A	onempt organization	(a) bacaspilati	or delibroro, deliberations, end		a.gcina	
	···		N/A		 				
 					 				
					- 				
		<u> </u>			 				
									
				-					
2a Is the f	oundation directly or indirect	by affiliated with, or	related to, one	or more tax-exempt organic	zations described				
	on 501(c) of the Code (other			· · ·		Г	Yes	X	ON [
	complete the following sche		,(-,, - ,			_			
<u> </u>	(a) Name of org			(b) Type of organization		(c) Description of relations	hip		
	N/A			(0) 1)		(0)			
	11/13			 	 				—
	·_				·	 .			
					-				
115	der penalties of perjury, I declare	that I have examined th	is return, includes	o accompanying schodules and	statements and to the	hest of my knowledge			
	d belief; it is true, correct, and con					- han and bandadan Ma	y the IRS um with th	discuss	this rer
Here	0101000	111 8/1/	2~	131/12/2-14	Dans	sho	own below	(see ins	
1.7	Signature of officer or trustee			<u></u>	Preside	<u>u </u>	X Yes	; L_	- No
	-		Dennassis	Date	Title	Chaok T CT			
	Print/Type preparer's na	IIIIC	Preparer's s	· ·	Date	Check if PTIN			
D-1.1		_	Man	iellclu	11/12/12	self- employed			
Paid -	MAMIE CHEW		Junior				<u>0773</u>		<u> </u>
Prepare		S LLC				Firm's EIN ► 33-1	1973	84	
Use On	•				·				
	Firm's address ▶ 10		-						
	SA	N FRANCIS	CO, CA	94105		Phone no. (415) 76	<u>4-2</u>	700
						Fr	orm 99 0)-PF	(2011)

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.

OMB No 1545-0047

Name of the organization

Employer identification number

PI	HILIP & REBECCA HOCHMAN FOUNDATION	20-2777268
Organization type (check o	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	
Note. Only a section 501(c	is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Spec	cial Rule. See instructions.
General Rule		
· ·	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more plete Parts I and II.	e (in money or property) from any one
Special Rules		
509(a)(1) and 170	I (c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of t D(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of In (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.	
total contribution	I (c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one as of more than \$1,000 for use <i>exclusively</i> for religious, chantable, scientific, literary, for cruelty to children or animals. Complete Parts I, II, and III.	
contributions for If this box is chec purpose. Do not	I (c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one use exclusively for religious, charitable, etc., purposes, but these contributions did cked, enter here the total contributions that were received during the year for an excomplete any of the parts unless the General Rule applies to this organization beckle, etc., contributions of \$5,000 or more during the year.	not total to more than \$1,000. cclusively religious, charitable, etc., cause it received nonexclusively
but it must answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schoon Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or one the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization

Employer identification number

PHILIP & REBECCA HOCHMAN FOUNDATION

20-2777268

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
1	DENNIS TROPER P.O. BOX 1936 LOS ALTOS, CA 94023	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	SUSAN WOJCICKI P.O. BOX 1936 LOS ALTOS, CA 94023	 s	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there Is a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)
Name of organization

Employer identification number

PHILIP & REBECCA HOCHMAN FOUNDATION

20-2777268

Part II	Noncash Property (see instructions). Use duplicate copies of Part	Il 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
		*	
(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
		s	
(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
		 \$	

Schedule B	(Form 990, 990-EZ, or 990-PF) (2011)		Page 4
Name of orga	anization		Employer identification number
חטדייי	C DEDEGGA MAGINAN SAIN	Dami Ou	20 25552
PHILIP Part III	Exclusively religious, charitable, etc., individually year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc., Use duplicate copies of Part III if additional	lual contributions to section 501(c)(7 following line entry. For organizations contributions of \$1,000 or less for the	20-2777268 (7), (8), or (10) organizations that total more than \$1,000 for the completing Part III, enter the year. (Enter this information once)
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	
 - 	Transferee's name, address, and	1 ZIP + 4	Relationship 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) Transfer of gift	
-	Transferee's name, address, and	1 ZIP + 4	Relationship 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) Transfer of gift	
	Transferee's name, address, and	•	Relationship of transferor to transferee
(a) No.			
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

REBECCA HOCHMAN FOUNDAT

PHILI

Part XV Supplementary Information

3 Grants and Contributions Paid During the Y		,		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
PARTNERS IN HEALTH 800 BOYLSTON STREET, 47TH FLOOR BOSTON, MA 02199	NONE	501(C)(3)	FUND RAISING/DISTRIBUTION - ADD'L INFO. AVAILABLE UP	10,000
CUREBLINDNESS.ORG/HIMALAYAN CATARACT PROJECT P.O. BOX 55 WATERBURY, VT 05676	NONE	501(C)(3)	FUND RAISING/DISTRIBUTION - ADD'L INFO, AVAILABLE UP	10,000
GLOBAL AIDS INTERFAITH ALLIANCE P.O. BOX 29110 SAN FRANCISCO , CA 94129-0110	NONE	501(C)(3)	FUND RAISING/DISTRIBUTION - ADD'L INFO. AVAILABLE UP	5,000
JEWISH COMMUNITY FEDERATION 121 STEUART STREET SAN FRANCISCO, CA 94105	NONE	501(C)(3)	FUND RAISING/DISTRIBUTION - ADD'L INFO. AVAILABLE UP	5,000
ANTI-DEFAMATION LEAGUE 605 THIRD AVENUE NEW YORK, NY 10158-3560	NONE	501(C)(3)	FUND RAISING/DISTRIBUTION - ADD'L INFO. AVAILABLE UP	5,000
ROOM TO READ 111 SUTTER STREET, 16TH FLOOR SAN FRANCISCO, CA 94104	NONE	501(C)(3)	FUND RAISING/DISTRIBUTION - ADD'L INFO, AVAILABLE UP	10,000
DOCTORS WITHOUT BORDERS 333 7TH AVENUE, 2ND FLOOR NEW YORK, NY 10001-5004	NONE	501(C)(3)	FUND RAISING/DISTRIBUTION - ADD'L INFO. AVAILABLE UP	5,000
PLANTING PEACE P.O. BOX 607 DESTIN, FL 32540	NONE	501(C)(3)	FUND RAISING/DISTRIBUTION - ADD'L INFO. AVAILABLE UP	10,000
CENTRAL ASIAN INSTITUTE P.O. BOX 7209 BOZEMAN, MT 59771	NONE	501(C)(3)	FUND RAISING/DISTRIBUTION - ADD'L INFO. AVAILABLE UP	5,000
WHEELCHAIR FOUNDATION 3820 BLACKHAWK ROAD DANVILLE, CA 94506-4617	NONE	501(C)(3)	FUND RAISING/DISTRIBUTION - ADD'L INFO. AVAILABLE UP	21,000
Total from continuation sheets	<u> </u>		F	181 000

REBECCA HOCHMAN FOUNDAT

20-2777268

Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor STANFORD UNIVERSITY NONE 501(C)(3) FUND DEVELOPMENT RAISING/DISTRIBUTION -STANFORD, CA 94305 ADD'L INFO. AVAILABLE 70 000. UP KATAHDIN FOUNDATION NONE 501(C)(3) FUND 1516 FIFTH STREET RAISING/DISTRIBUTION -BERKELEY, CA 94710 ADD'L INFO. AVAILABLE UP 15,000. COMPUTER HISTORY MUSEUM NONE 501(C)(3) FUND 1401 N. SHORELINE BLVD. RAISING/DISTRIBUTION -MOUNTAIN VIEW, CA 94043 ADD'L INFO. AVAILABLE 10,000. Total from continuation sheets

N/A

PHILIP & REBECCA Part IV Capital Gains and Los		ION 20-277	7.3	PAGE	1	OF	1
1	ses for Tax on investment income		(45.115				 -
(a) List and 2-story bri	describe the kind(s) of property solo ck warehouse; or common stock, 20	I, e.g., real estate, 00 shs. MLC Co.	P - Purch D - Dona	quired (c) Date acqu nase tion (mo., day, y	red r.)	(d) Date (mo., day	
1a 6 SHS GS LOCAL	EMERGING MARKET	S DEBT FUND INSTI	TU P	07/29/	11)9/14	/11
		TS DEBT FUND INST		08/31/	110	09/14	/11
c 8,999 SHS GS LC			INS P				
d 1,246 SHS VANGU			P				
			P				
e 470 SHS VANGUAL							
	RD INDEX FUNDS S		P				
g 98 SHS VANGUARI	<u>D INDEX FUNDS VA</u>	<u>LUE</u>	P				
h 119 SHS VANGUAI		RKET ETF	P	03/16/	09	<u>11/03</u>	3/11
CAPITAL GAINS	DIVIDENDS				\dashv		
k					コ		
1							
n n					\dashv		
0							
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (loss (e) plus (f) minus			
a 56.		60.					<4.
b 275.		294.					<u><19.</u>
c 83,421.		89,000.				<5,5	<u>579.</u>
d 100,114.		94,963.				5,1	151.
e 29,027.		17,339.				11,6	
1 27,047.		15,307.				11,7	
		3,557.					463.
							
h 9,976.		9,070.					906.
6,626.						6,6	<u>626.</u>
							
k							
1							
m							
n							
0							
	ng gain in column (h) and owned by	the foundation on 12/31/69		(I) Losses (from col	_ (h))		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		Gains (e	excess of col. (h) gair but not less than "-	over	col. (k),	
a							<4.
b						-	<19.
С							579.
d		-					151.
						11,6	
<u>e</u>							
<u>f</u>						11,	
9							<u>463.</u>
<u>h</u>							906.
1						6,6	626.
<u>k</u>							
1							
m							
n							
			<u>.</u>				
0	<u> </u>	<u> </u>			—		
2 Capital gain net income or (net ca	apital loss) { If gain, also enter	r in Part I, line 7	2			31.4	972.

Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CAS	H INVESTMENTS	STATEMENT	1
SOURCE				AMOUNT	
GS #02266-5 GS #02274-9 GS #02276-4					1. 55. 49.
TOTAL TO FORM 990-PF, PART I	, LINE 3, CO	DLUMN A		21	15.
FORM 990-PF DIVIDENT	OS AND INTER	REST FROM S	ECURITIES	STATEMENT	2
SOURCE	GROSS	S AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A AMOUNT)
GS #02266-5 GS #04859-5		118,213. 15,721.	4,860. 1,766.	113,3 13,9	
TOTAL TO FM 990-PF, PART I,	LN 4	133,934.	6,626.	127,3	08.
FORM 990-PF	OTHER :	INCOME		STATEMENT	3
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME		
PARTNERSHIP INCOME		55,86	52,860).	
TOTAL TO FORM 990-PF, PART I	, LINE 11 =	55,86	52,860).	
FORM 990-PF	LEGA	L FEES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO			
LEGAL FEES	1,635	•	0.	1,6	35.
TO FM 990-PF, PG 1, LN 16A	1,635	•	0.	1,6	35.

FORM 990-PF	ACCOUNTII	NG FEES	Si	PATEMENT
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABL PURPOSES
ACCOUNTING FEES	11,000.	0.		11,000
TO FORM 990-PF, PG 1, LN 16B	11,000.	0.		11,000
FORM 990-PF O	THER PROFES	SIONAL FEES	Si	FATEMENT
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABL PURPOSES
GS (MANAGEMENT FEES)	10,713.	10,713.		0
TO FORM 990-PF, PG 1, LN 16C =	10,713.	10,713.		0
FORM 990-PF	TAX	ES	S	FATEMENT
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABL PURPOSES
DESCRIPTION FOREIGN TAXES OTHER TAXES	EXPENSES	NET INVEST-	ADJUSTED	CHARITABL
FOREIGN TAXES	EXPENSES PER BOOKS 3,094. 10.	MENT INVEST- MENT INCOME 3,094.	ADJUSTED	CHARITABL PURPOSES
FOREIGN TAXES OTHER TAXES	EXPENSES PER BOOKS 3,094. 10.	NET INVEST- MENT INCOME 3,094. 0. 3,094.	ADJUSTED NET INCOME	CHARITABL PURPOSES 0
FOREIGN TAXES OTHER TAXES TO FORM 990-PF, PG 1, LN 18	EXPENSES PER BOOKS 3,094. 10. 3,104.	NET INVEST- MENT INCOME 3,094. 0. 3,094. XPENSES (B) NET INVEST-	ADJUSTED NET INCOME	CHARITABL PURPOSES 0 0
FOREIGN TAXES OTHER TAXES TO FORM 990-PF, PG 1, LN 18 FORM 990-PF	EXPENSES PER BOOKS 3,094. 10. 3,104. OTHER E (A) EXPENSES	NET INVEST- MENT INCOME 3,094. 0. 3,094. XPENSES (B) NET INVEST-	ADJUSTED NET INCOME ST. (C) ADJUSTED	CHARITABL PURPOSES 0 0 TATEMENT (D) CHARITABL

TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII

FORM 990-PF OTH	HER INVESTMENTS		STATI	EMENT	9
DESCRIPTION	VALUATION METHOD	BOOK VALU	_	MARKE ALUE	T
STERLING STAMOS PRIVATE EQUITY FUR	ND COST	160,5		178,8	08.
STERLING STAMOS REAL ASSETS FUND,	COST	•			
LP		696,7		752,1	
STERLING ENDOWMENT FUND	COST	1,638,6		231,1	
3S #02266	COST	3,386,2		,149,9	
GS #04859	COST	168,0		177,1	
MESA COURT	COST	90,8	24. 	90,8	24
TOTAL TO FORM 990-PF, PART II, LI	NE 13	6,141,0	61. 5	,579,9	06.
FORM 990-PF PART VIII - LIS'	r OF OFFICERS, D	IRECTORS	STAT	EMENT	10
	FOUNDATION MANA		EMPLOYEE		
				EXPEN	
NAME AND ADDRESS	FOUNDATION MANAG	GERS COMPEN-	EMPLOYEE BEN PLAN	EXPEN	
NAME AND ADDRESS SUSAN WOJCICKI	TITLE AND AVRG HRS/WK	GERS COMPEN-	EMPLOYEE BEN PLAN CONTRIB	ACCOU	NT
TRUSTEES AND	TITLE AND AVRG HRS/WK PRESIDENT	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	ACCOU	NT
NAME AND ADDRESS SUSAN WOJCICKI P.O. BOX 1936 LOS ALTOS, CA 94023 ANNE WOJCICKI	TITLE AND AVRG HRS/WK PRESIDENT 0.50 VICE PRESIDENT	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	ACCOU	0
NAME AND ADDRESS SUSAN WOJCICKI P.O. BOX 1936 LOS ALTOS, CA 94023	TITLE AND AVRG HRS/WK PRESIDENT 0.50	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	ACCOU	NT
NAME AND ADDRESS SUSAN WOJCICKI P.O. BOX 1936 LOS ALTOS, CA 94023 ANNE WOJCICKI P.O. BOX 1936	TITLE AND AVRG HRS/WK PRESIDENT 0.50 VICE PRESIDENT	COMPEN- SATION 0.	EMPLOYEE BEN PLAN CONTRIB	ACCOU	0
NAME AND ADDRESS SUSAN WOJCICKI P.O. BOX 1936 LOS ALTOS, CA 94023 ANNE WOJCICKI P.O. BOX 1936 LOS ALTOS, CA 94023 JANET WOJCICKI P.O. BOX 1936	TITLE AND AVRG HRS/WK PRESIDENT 0.50 VICE PRESIDENT 0.50	COMPEN- SATION 0. 0.	EMPLOYEE BEN PLAN CONTRIB 0.	ACCOU	0 0

0.

0.

0.

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT 11

NAME OF MANAGER

SUSAN WOJCICKI DENNIS TROPER

Form **8868** (Rev. January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

• If you	are filing for an Automatic 3-Month Extension, complet	te only Pa	rt I and check this box			X	
	are filing for an Additional (Not Automatic) 3-Month Ex	-		his form).	•		
Do not	complete Part II unless you have already been granted a	an automa	tic 3-month extension on a previous	ly filed Fo	m 8868.		
	nic filing (e-file) . You can electronically file Form 8868 if y					oration	
	to file Form 990-T), or an additional (not automatic) 3-mor						
	to file any of the forms listed in Part I or Part II with the exc		-				
Persona	al Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions). For more details o	n the elec	tronic filing of this	form,	
	w.irs.gov/efile and click on e-file for Charities & Nonprofits		·				
Part	Automatic 3-Month Extension of Time	Only s	ubmit original (no copies nee	eded).			
A corpo	ration required to file Form 990-T and requesting an autor		•				
Part I o	nly				>	• 🔲	
All othe	r corporations (including 1120-C filers), partnerships, REM	IICs, and ti	rusts must use Form 7004 to reques	t an exten	sion of time		
to file in	come tax returns.						
Туре о	or Name of exempt organization or other filer, see instructions. Employer identification nur					ber (EIN) or	
print							
Cile his Mis	PHILIP & REBECCA HOCHMAN FOUNDATION					20-2777268	
file by the	for Number, street, and room or suite no. If a P.O. box, see instructions.				Social security number (SSN)		
filing your return Se							
instruction		oreign add	ress, see instructions.				
	LOS ALTOS, CA 94023						
Enter th	ne Return code for the return that this application is for (file	e a separa	te application for each return)			0 4	
	<u></u>						
Applica	ation	Return	Application			Return	
Is For		Code	Is For			Code	
Form 9	90	01	Form 990-T (corporation)			07	
Form 990-BL		02	Form 1041-A			08	
Form 990-EZ		01	Form 4720			09	
Form 990-PF		04	Form 5227			10	
Form 990-T (sec. 401(a) or 408(a) trust)		05	Form 6069			11	
Form 990-T (trust other than above)		06	Form 8870			12	
	SARAH BLATNER						
	books are in the care of 1890 STOCKBRID	GE AV	ENUE - REDWOOD CIT	Y, CA	94061		
	phone No. ► 650-366-7705		FAX No. D				
	e organization does not have an office or place of business					▶ ☐	
_	s is for a Group Return, enter the organization's four digit						
box 🕨					ers the extension i	is for.	
1 1	request an automatic 3-month (6 months for a corporation						
-		t organiza	tion return for the organization name	ed above.	The extension		
	for the organization's return for:						
	X calendar year 2011 or						
•	tax year beginning	, an	d ending				
	the territory and the state of						
2 li	the tax year entered in line 1 is for less than 12 months, o	heck reas	on: L Initial return L	Final retu	n		
+	Change in accounting period						
<u> </u>	Abor and a start of the Control of t				r		
	this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	inter the tentative tax, less any			^	
_	onrefundable credits. See instructions.	3a	\$	0.			
	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and					2 101	
_	stimated tax payments made. Include any prior year overp			Зь	\$ 1	2,191.	
	Balance due. Subtract line 3b from line 3a. Include your pa	-	• •	_	ا ،	0.	
	y using EFTPS (Electronic Federal Tax Payment System).			3c	50.0		
Cautio	n. If you are going to make an electronic fund withdrawal v	with this F	orm 6668, see Form 8453-EO and F	orm 8879	EU for payment in:	structions.	

Part II Additional (Not Automatic) 3-Month Ex	tensior	n of Time. Only file the origin	nal (no c	opies nee	eded).		
	-	Enter filer's	identifyin	g number,	see instructions		
ype or Name of exempt organization or other filer, see instructions			Employer	mployer identification number (EIN) or			
nt							
THE THE TENED CONTROL TO COMPANY TO STATE OF THE TENED CONTROL TO				x 20-2777268			
ding word	regularity and regularity of some no. If a PO box, see instructions.				iocial security number (SSN)		
return See P.O. BOX 1936							
City, town or post office, state, and ZIP code. For a for LOS ALTOS, CA 94023	eign add	ress, see instructions					
DOS ADIOS, CA 94025		······································					
Enter the Return code for the return that this application is for (file	a separa	te application for each return)			0 4		
and the state of t			•				
Application	Return	Application			Return		
ls For	Code	Is For			Code		
Form 990	01						
Form 990 BL	02	Form 1041-A			08		
Form 990-EZ	01 04	Form 4720			09		
Form 990 PF		Form 5227			10		
Form 990-T (sec. 401(a) or 408(a) trust)		Form 6069			11_		
Form 990 T (trust other than above)		Form 8870		- 1 F 000	12		
STOP! Do not complete Part II if you were not already granted SARAH BLATNER	an autor	natic 3-month extension on a pre	viousiy ille	o Form 88			
• The books are in the care of ▶ 1890 STOCKBRIDG	TE AV	מסטעמא - אוועא	מי עיו	94061			
Telephone No ▶ 650-366-7705	, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	FAX No. ▶	/	7 2 0 0 2	·		
If the organization does not have an office or place of business	in the U	• ————			▶ □		
If this is for a Group Return, enter the organization's four digit 0			If this is fo	r the whole	group, check this		
box ▶ ☐ If it is for part of the group, check this box ▶ ☐					-		
4 I request an additional 3-month extension of time until	OVEM	BER 15, 2012.					
			20				
5 For calendar year 2011, or other tax year beginning		, and endi	···y				
6 If the tax year entered in line 5 is for less than 12 months, cl	neck reas		Final	return			
	neck reas		_	return			
6 If the tax year entered in line 5 is for less than 12 months, cl Change in accounting period State in detail why you need the extension		son· Initial return	Final				
6 If the tax year entered in line 5 is for less than 12 months, cl [] Change in accounting period 7 State in detail why you need the extension ADDITIONAL TIME IS NECESSARY I		son· Initial return	Final		REQUIRED		
6 If the tax year entered in line 5 is for less than 12 months, cl Change in accounting period State in detail why you need the extension		son· Initial return	Final		REQUIRED		
6 If the tax year entered in line 5 is for less than 12 months, cl. Change in accounting period 7 State in detail why you need the extension ADDITIONAL TIME IS NECESSARY I TO PREPARE A COMPLETE RETURN.	N OR	DER TO OBTAIN THE	Final		REQUIRED		
6 If the tax year entered in line 5 is for less than 12 months, cl. Change in accounting period 7 State in detail why you need the extension ADDITIONAL TIME IS NECESSARY I TO PREPARE A COMPLETE RETURN. 8a If this application is for Form 990 BL, 990 PF, 990-T, 4720, cl.	N OR	DER TO OBTAIN THE	DOCUM	ENTS F			
6 If the tax year entered in line 5 is for less than 12 months, cl. Change in accounting period 7 State in detail why you need the extension ADDITIONAL TIME IS NECESSARY I TO PREPARE A COMPLETE RETURN. 8a If this application is for Form 990 BL, 990 PF, 990-T, 4720, of nonrefundable credits. See instructions.	IN OR	DER TO OBTAIN THE	Final		REQUIRED		
6 If the tax year entered in line 5 is for less than 12 months, cl. Change in accounting period 7 State in detail why you need the extension ADDITIONAL TIME IS NECESSARY I TO PREPARE A COMPLETE RETURN. 8a If this application is for Form 990 BL, 990 PF, 990-T, 4720, or nonrefundable credits. See instructions. b If this application is for Form 990 PF, 990-T, 4720, or 6069, and the second	N OR	DER TO OBTAIN THE	DOCUM	ENTS F			
6 If the tax year entered in line 5 is for less than 12 months, cl. Change in accounting period 7 State in detail why you need the extension ADDITIONAL TIME IS NECESSARY IT TO PREPARE A COMPLETE RETURN. 8a If this application is for Form 990 BL, 990 PF, 990-T, 4720, or nonrefundable credits. See instructions. b If this application is for Form 990 PF, 990-T, 4720, or 6069, tax payments made. Include any prior year overpayment alleres.	N OR	DER TO OBTAIN THE	DOCUM	ENTS F	0.		
If the tax year entered in line 5 is for less than 12 months, cl. Change in accounting period State in detail why you need the extension ADDITIONAL TIME IS NECESSARY ITO PREPARE A COMPLETE RETURN. Ba If this application is for Form 990 BL, 990 PF, 990-T, 4720, or nonrefundable credits. See instructions. If this application is for Form 990 PF, 990-T, 4720, or 6069, tax payments made. Include any prior year overpayment allegoreviously with Form 8868.	or 6069, enter any	DER TO OBTAIN THE	DOCUM	ENTS F			
6 If the tax year entered in line 5 is for less than 12 months, cl	or 6069, enter any	DER TO OBTAIN THE	DOCUM 8a 8b	S	0.		
6 If the tax year entered in line 5 is for less than 12 months, cl	or 6069, eenter anyowed as syment witchins.	DER TO OBTAIN THE	DOCUM 8a 8b	ENTS F	0.		
6 If the tax year entered in line 5 is for less than 12 months, cl. Change in accounting period 7 State in detail why you need the extension ADDITIONAL TIME IS NECESSARY ITO PREPARE A COMPLETE RETURN. 8a If this application is for Form 990 BL, 990 PF, 990-T, 4720, or nonrefundable credits. See instructions. b If this application is for Form 990 PF, 990-T, 4720, or 6069, it tax payments made. Include any prior year overpayment allegation previously with Form 8868. c Balance due. Subtract line 8b from line 8a. Include your pate FTPS (Electronic Federal Tax Payment System). See instructions. Signature and Verification.	or 6069, eenter anyowed as symmetry with the second	DER TO OBTAIN THE enter the tentative tax, less any refundable credits and estimated a credit and any amount paid th this form, if required, by using	Pinal I	S \$	12,191		
6 If the tax year entered in line 5 is for less than 12 months, cl. Change in accounting period 7 State in detail why you need the extension ADDITIONAL TIME IS NECESSARY ITO PREPARE A COMPLETE RETURN. 8a If this application is for Form 990 BL, 990 PF, 990-T, 4720, or nonrefundable credits. See instructions. b If this application is for Form 990 PF, 990-T, 4720, or 6069, tax payments made. Include any prior year overpayment allegications with Form 8868. c Balance due. Subtract line 8b from line 8a. Include your pate FTPS (Electronic Federal Tax Payment System). See instructions. Signature and Verification is line, correct, and complete, and that I am authorized to prepare this form.	or 6069, eenter anyowed as symmetry with the second control of the	DER TO OBTAIN THE enter the tentative tax, less any refundable credits and estimated a credit and any amount paid th this form, if required, by using	Pinal I	S \$	0. 12,191. 0.		
6 If the tax year entered in line 5 is for less than 12 months, cl. Change in accounting period 7 State in detail why you need the extension ADDITIONAL TIME IS NECESSARY ITO PREPARE A COMPLETE RETURN. 8a If this application is for Form 990 BL, 990 PF, 990-T, 4720, or nonrefundable credits. See instructions. b If this application is for Form 990 PF, 990-T, 4720, or 6069, it tax payments made. Include any prior year overpayment allegation previously with Form 8868. c Balance due. Subtract line 8b from line 8a. Include your pate FTPS (Electronic Federal Tax Payment System). See instructions. Signature and Verification.	or 6069, eenter anyowed as symmetry with the second control of the	DER TO OBTAIN THE enter the tentative tax, less any refundable credits and estimated a credit and any amount paid th this form, if required, by using	Ba 8b 8c only.	S \$	0. 12,191. 0.		