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OMB No 1545-0052

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

Do not enter Social Security numbers on this form as it may be made public.
Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. , and ending

For calendar year 2013 or tax year beginning	·	, and ending		
Name of foundation			A Employer identification	number
GSF FOUNDATION	46-0501728			
Number and street (or P O box number if mail is not delivered to street	•	B Telephone number		
18301 VON KARMAN AVENUE		1100	949-252-20	00
City or town, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is pe	ending, check here
IRVINE, CA 92612				. —
G Check all that apply:	Initial return of a fo	rmer public charity	D 1. Foreign organizations,	check here
Final return	Amended return		Foreign organizations mea check here and attach cor	eting the 85% test,
Address change	L Name change	····	check here and attach cor	nputation
H Check type of organization: X Section 501(c)(3) ex			E If private foundation stat	
Section 4947(a)(1) nonexempt charitable trust		X Accrual	under section 507(b)(1)	•
I Fair market value of all assets at end of year J Account	ng method: L Cash ther (specify)	ACCIUAI	F If the foundation is in a 6 under section 507(b)(1)	
(from Part II, col. (c), line 16) ►\$ 1,158,566. (Part I, colu		pasis.)	under section 507(b)(1)	(b), check here
	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (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	3,640,536.			,
2 Check If the foundation is not required to attach Sch B	-,,000	17		
	646.	646.		STATEMENT 1
3 Interest on savings and temporary cash investments 4 Dividends and interest from securities				
5a Gross rents				
b Net rental income or (loss)			<u></u>	
6a Net gain or (loss) from sale of assets not on line 10			RE	CEIVED L
6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2)				70
7 Capital gain net income (from Part IV, line 2)		0.	<u> </u> AUC	1 1 2014
8 Net short-term capital gain			12 400	1 2017
9 Income modifications Gross sales less returns				
10a and allowances			OG	DEW, UI
8 Net short-term capital gain 9 Income modifications Gross sales less returns 10a and allowances b Less Cost of goods sold c Gross profit or (loss)				
c Gross profit or (loss)	313,314.	0.	0.	STATEMENT 2
12 Total. Add lines 1 through 11	3,954,496.	646.	0.	DITTIBILITY 2
13 Compensation of officers, directors, trustees, etc	0.	0.0		0.
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees				
b Accounting fees				
c Other professional fees				
9 17 Interest				
18 Taxes STMT 3	16.	0.	0.	10.
19 Depreciation and depletion	4,706.	0.	0.	
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications	1.655.464			1 606 001
b Accounting fees c Other professional fees 17 Interest 18 Taxes STMT 3 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 4 Total operating and administrative expenses. Add lines 13 through 23	1,655,464.	0.	0.	1,606,891.
24 Total operating and administrative	1 660 106	0.	. 0.	1 606 001
expenses. Add lines 13 through 23	1,660,186.	ļ <u>" " " '</u>	<u> </u>	1,606,901. 2,199,701.
25 Contributions, girls, grains paid	4,133,101.		 	4,177,101.
26 Total expenses and disbursements. Add lines 24 and 25	3,859,887.	0.	. 0.	3,806,602.
27 Subtract line 26 from line 12:	3,035,007.		 	3,300,002.
27 SUBTRACT THE 25 FORTH THE 12. a Excess of revenue over expenses and disbursements	94,609.			
b Net investment income (if negative, enter -0-)	31,003.	646		
c Adjusted net income (if negative, enter -0-)			0.	
323501 10-10-13 LHA For Paperwork Reduction Act Notice, se	e instructions.			Form 990-PF (2013)

46-0501728 Form 990-PF (2013) GSF FOUNDATION Page 2 Beginning of year Attached schedules and amounts in the description **Balance Sheets** Part II column should be for end-of-year amounts only (a) Book Value (b) Book Value (c) Fair Market Value 1 Cash - non-interest-bearing 946,501. 1,082,783. 1,082,783. 2 Savings and temporary cash investments 64,213 3 Accounts receivable ▶ 52,449 64,213 64,213. 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 8,692. 8,534. 8,534. 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations b Investments - corporate stock c Investments - corporate bonds 11 Investments land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 23,529 14 Land, buildings, and equipment basis I 3,036. 20,493 7,742 3,036. Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 1,158,566. 1,015,384. 1,158,566. instructions. Also, see page 1, item 1) 23,103. 71,676. 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 23,103. 71,676. 23 Total liabilities (add lines 17 through 22) ► X Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. 992,281. 1,086,890 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 992,281. 1,086,890. 30 Total net assets or fund balances 1,015,384. 1,158,566 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	992,281.
2	Enter amount from Part I, line 27a	2	94,609.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	1,086,890.
5	Decreases not included in line 2 (itemize) ▶	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	1,086,890.
	· · · · · · · · · · · · · · · · · · ·		- 000 DE :

Part IV Capital Gains a	and Lo	sses for Tax on In	vestment	Income						
(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.)			(<u>a)</u>				Date acquired o., day, yr.)	(d) Date sold (mo., day, yr.)		
1a					Ť					
b NO	NE					•				
C										
d					<u> </u>					
<u>e</u>					Ц,					
(e) Gross sales price	(f) 	Depreciation allowed (or allowable)		t or other basis xpense of sale					(h) Gain or (loss plus (f) minus	
a				· · · · · · · · · · · · · · · · · · ·						
b			-							
C										
d	 			····						
Complete only for assets showin	u usin in	column (h) and owned by t	he foundation	on 12/31/69				(I) Gau	ns (Col. (h) gain	minus
Semple only for assets shown		(j) Adjusted basis		cess of col. (I)				òl. (k),	but not less tha	n -0-) or
(i) F.M.V. as of 12/31/69		as of 12/31/69		col. (j), if any				Los	sses (from col.	(h))
a										
b										
С										
d										
е						_				
2 Capital gain net income or (net ca	pıtal loss	If gain, also enter If (loss), enter -0-	in Part I, line	7 7	}	2				
3 Net short-term capital gain or (los		`								
If gain, also enter in Part I, line 8,			u (u).)					
If (loss), enter -0- in Part I, line 8		-			J	3				
Part V Qualification U	nder S	Section 4940(e) for	Reduced	Tax on Net	Inv	estn	nent In	com	ne	
(For optional use by domestic private If section 4940(d)(2) applies, leave the			1540(a) tax on	not invostment ii	100111	. ,				
Was the foundation liable for the sect	tion 4942	tax on the distributable am	ount of any ve	ear in the base pe	riod?					Yes X No
If "Yes," the foundation does not qual										
1 Enter the appropriate amount in e	each colu	mn for each year; see the ir	istructions be	fore making any e	entries	s.				
(a) Base period years		(b)			(c				Distri	(d) bution ratio
Calendar year (or tax year beginnii	ng in)	Adjusted qualifying dis		Net value of no					(col. (b) di	vided by col. (c))
2012			3,978.			·	7,50			2.134168
2011			9,393.				$\frac{8,76}{3,10}$			2.038816
2010			2,607.				3,17			1.913571
2009			5,338.				$\frac{7,76}{2}$			1.897164
2008		3,12	7,937.			, 50	9,85	 -	1	2.469074
2 Total of line 1, column (d)								.	2	10.452793
3 Average distribution ratio for the the foundation has been in existe			on line 2 by 5,	or by the number	r of ye	ears			3	2.090559
4 Enter the net value of noncharitat		·	line 5						4	1,809,593
4 Emer the net value of noncharnat	ne-use as	ssets for 2013 from Part A,	iiile 3						4	
5 Multiply line 4 by line 3								-	5	3,783,061
6 Enter 1% of net investment incom	ne (1% o	f Part I, line 27b)						.	6	6 .
7 Add lines 5 and 6									7	3,783,067
8 Enter qualifying distributions from									8	3,806,602
If line 8 is equal to or greater than See the Part VI instructions.	n line 7, c	theck the box in Part VI, line	tb, and comp	olete that part usi	ng a 1	1% tax	rate.			
										Form 990-PF (201)

Part VI Excise Tax Based on Investment Income (Section 4940(b), 4940(b), or 4948 - see instructions) It been of ording or determination letter. (attach copy of letter if accessary-see instructions) Domeste foundations that meet the section 4940(c) (2), check here				017			Page 4
Date of ruling or determination letter: Somestic foundations that meet the section 4940(e) requirements in Part V, check here ▶			-	00 1110			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► X and enter 1% of Part I, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(e)(f) inusts and travable foundations only, Others enter -0-) 2 Tax under section 511 (domestic section 4947(e)(f) inusts and travable foundations only, Others enter -0-) 3			1				
of Part, line 27b All other domestic foundations enter 2% of lane 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). 2 Tax under section STI (domestic section 4947(a)(T) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 Substitle A (norme) tax (domestic section 4947(a)(T) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3, if zero or less, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3, if zero or less, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3, if zero or less, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3, if zero or less, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3, if zero or less, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3, if zero or less, enter -0-) 6 Backup withholding erronecously withheld 7 Tabl credits and payments. Add lines its through 8 did 15. 6 Backup withholding erronecously withheld 7 Tabl credits and payments. Add lines 8 fam 64, enter the amount over paid 8 Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached 8 Tax due, If the double found fam 6 is the income than the table of lanes 5 and 64, enter the amount over paid 10 Overpayment. If line 7 is more than the table of lanes 5 and 64, enter the amount over paid 10 Overpayment. If line 7 is more than the table of lanes 5 and 64, enter the amount over paid 10 Overpayment. If line 7 is more than the table of lanes 5 and 64, enter the amount over paid 10 Overpayment. If line 7 is more than the table of lanes 5 and 64, enter the amount over paid 10 Overpayment. If line 7 is more than the table than 5 and 64, enter the amount over paid 10 Overpayment. If line 7 is more than 1 be table than 5 and 64, enter the amount over paid 10 Overpayment. If line 7 is more than 1 be table than 5 and 64, enter the amount over paid 10 Overpayment.			1				6
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8 Enter any penalty for underpayment of estimated tax. Check here	d	Backup withholding erroneously withheld	1				
9 Tax due. If the total of knes 5 and 8 is more than line 7, enter amount overd 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 1 Enter the amount of line 10 to be. Credited to 2014 estimated tax ▶ 9 . Refunded ▶ 11 0 0 . Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any poblical campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any poblical campaign? 1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1b M it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1b M it the answer is "Yes" to 1 ₈ or 1 ₁₀ or 1 ₁₀ a tation a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 2 In the foundation in part 1120-Pol. for this year? 3 In the foundation. S O. (2) On foundation managers. S O. 4 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year. (1) On the foundation. S O. (2) On foundation managers. S O. 5 In the foundation managers. S O. 6 Enter the rembursement (if any) part by the foundation during the year for political expenditure tax imposed on foundation managers. S O. 7 Has the foundation managers. S O. 8 Has the foundation managers. S O. 9 If "Yes," attach a detailed description of the activities. 1 Has the foundation managers in the activities. 1 Has the foundation managers. S O. 1 Has the foundation managers. S O. 2 Has the foundation managers. S O. 2 Has the foundation managers. S O. 3 In "Yes," attach a detailed description of the activities. 4 Has the foundation managers. S O. 4 In "Yes," a	7	Total credits and payments. Add lines 6a through 6d					<u> 15.</u>
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2014 estimated tax ▶ 9 . Refunded ▶ 11 1 0. Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1b If the answer is "Yes" to 1 12 or 1 15	8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8					
11 Enter the amount of line 10 to be: Credited to 2014 estimated tax ▶ 9 . Refunded ▶ 11	9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed .	\perp				
Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? If the answer is "Yes" to 1 _a or 1 _b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-Poll for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year. (if) On the foundation № \$ 0 (2) On foundation managers. ▶ \$ 0 e Enter the rembursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities. 3 Has the foundation make on changes, not previously preported 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 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a tax return on Form 990-T for this year? N/A b If "Yes," attach the statement required by General Instruction T. 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, 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, or By language	10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid)				
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	10			-			
TOTAL COLOR				Form		-PF	

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	dations	, 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	0.
	Average of monthly cash balances	1b	1,837,150.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,837,150.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,837,150.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	27,557.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,809,593.
6	Minimum investment return. Enter 5% of line 5	6	90,480.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	90,480.
2a	Tax on investment income for 2013 from Part VI, line 5		
b	Income tax for 2013. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	6.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	90,474.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	90,474.
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 XIII, line 1	7	90,474.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	1.1	2 006 602
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	3,806,602.
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	
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	2 226 620
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	3,806,602.
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	6.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,806,596.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies f	for the section

Page 9

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI,				
line 7	ľ			90,474.
2 Undistributed income, if any, as of the end of 2013				· · · · · · · · · · · · · · · · · · ·
a Enter amount for 2012 only			0.	
b Total for prior years:				
<u> </u>		0.		
3 Excess distributions carryover, if any, to 2013:				
aFrom 2008 3,652,416.				
b From 2009 2,877,451.				
c From 2010 3,099,467.	İ			
dFrom 2011 4,193,973.	[
eFrom 2012 3,246,115.	45 454 454			
f Total of lines 3a through e	17,069,422.			
4 Qualifying distributions for 2013 from				
Part XII, line 4: ►\$ 3,806,602.		ŀ		
a Applied to 2012, but not more than line 2a			0.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		U •		
c Treated as distributions out of corpus	0.			
(Election required - see instructions)				90,474.
d Applied to 2013 distributable amount e Remaining amount distributed out of corpus	3,716,128.			30,474.
5 Excess distributions carryover applied to 2013	0.			0.
(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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	20,785,550.			· · · · · · · · · · · · · · · · · · ·
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		0		
assessed	· · · · · · · · · · · · · · · · · · ·	0.		-
d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions				
e Undistributed income for 2012. Subtract line			0.	
4a from line 2a. Taxable amount - see instr. f Undistributed income for 2013. Subtract			0.	
lines 4d and 5 from line 1. This amount must				
be distributed in 2014				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 2008				
not applied on line 5 or line 7	3,652,416.			
9 Excess distributions carryover to 2014.				
Subtract lines 7 and 8 from line 6a	17,133,134.			
10 Analysis of line 9:				
a Excess from 2009 2,877,451.				
b Excess from 2010 3,099,467.				
c Excess from 2011 4,193,973.		;		
d Excess from 2012 3, 246, 115.				
e Excess from 2013 3,716,128.	L.,			5 000 DE (00 100 100 100 100 100 100 100 100 100
				Form 990-PF (2013)

Part XV . Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Y		Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	oona is a sore	
a Paid during the year				
A CHILD VOICE ADVOCACY CENTER		PC	GENERAL SUPPORT	
1132 USHER STREET, ROOM 313				
CONYERS, GA 30014				26,497.
ADOPT-A-FAMILY		PC	GENERAL SUPPORT	
P.O. BOX 7278				
RANCHO SANTA FE, CA 92067				1,182.
ALTERNATIVE FOR BATTERED WOMEN		PC	GENERAL SUPPORT	
P.O. BOX 39601				
ROCHESTER, NY 14604				1,000.
ARMED SERVICES YMCA SAN DIEGO		PC	GENERAL SUPPORT	
3293 SANTO ROAD				
SAN DIEGO, CA 92124		ļ		37,822.
			1	
A-T CHILDREN'S PROJECT		₽C	GENERAL SUPPORT	
668 S. MILITARY TRAIL				
Total SEE CO.	 NTINUATION SHEE	7m / C \		10,000.
b Approved for future payment	NITHOWITON SUFI	21 (2)	<u>▶ 3a</u>	2,199,701.
2 y prieved for ratare payment				
NONE				
		† · · ·		
Total			▶ 3b	ō.

Part XVI-A Analysis of Income-Producing Activities

	Inrelate	d business income	Evol	ded by section 512 513 or 514	, .
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion code	ded by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		code	, anount	Torrottori intodito
					
b					
d				,	
e					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	646.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate;					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events	ļ				
10 Gross profit or (loss) from sales of inventory					
11 Other revenue: a AUCTION PROCEEDS - STARS					
a AUCTION PROCEEDS - STARS b & STRIPES			ļ		212 214
β α SIRIPES			ļ		313,314.
C			 		
d			 -		
12 Subtotal. Add columns (b), (d), and (e)		0.	<u> </u>	646.	313,314.
13 Total. Add line 12, columns (b), (d), and (e)		0.	L	13	313,960.
(See worksheet in line 13 instructions to verify calculations.)				"-	313,300.
				. .	
Part XVI-B Relationship of Activities to	o the Acc	omplishment of Ex	emp	ot Purposes	
Line No. Explain below how each activity for which incor	ne is reported	ın column (e) of Part XVI-A	contri	buted importantly to the accor	nplishment of
the foundation's exempt purposes (other than to					
11A IN ADDITION TO RAISING					
THROUGH DONATIONS, THE					UCTION EVENTS
TO SUPPORT THE FOUNDATI	ON'S C	HARITABLE PU	RPC	SES.	··-··
					
	· · · · · · · · · · · · · · · · · · ·				,
					
					 -
					
					
					
		·=·			
	 -			····	
					· · · · · · · · · · · · · · · · · · ·
				•	

Part XVII	1		sfers To a	and Transactions a	and Relation	ships With Nonch	aritable	
4 004	Exempt Organ		- (1) - (- 1)	- th th		-t F01/s) of		s No
				g with any other organization		ction 501(c) of		SINO
	•			7, relating to political organ	nizations?			
	from the reporting found	ation to a noncharitat	ole exempt org	ganization of:				
(1) Cash		-					1a(1)	X
(2) Other	assets						1a(2)	X
b Other tran	sactions:							
(1) Sales	of assets to a noncharita	ble exempt organizat	ion .				1b(1)	X
(2) Purcl	nases of assets from a no	ncharitable exempt o	rganization	-	•		1b(2)	X
(3) Renta	al of facilities, equipment,	or other assets					1b(3)	X
(4) Reim	bursement arrangements	1		-	·-		1b(4)	X
(5) Loan	s or loan guarantees		_				1b(5)	X
(6) Perfo	rmance of services or me	embership or fundrais	sing solicitatio	ns		_	1b(6)	X
c Sharing o	f facilities, equipment, ma	uling lists, other asset	ts, or paid em	ployees		_	1c	X
d If the ansi	wer to any of the above is	"Yes," complete the f	ollowing sche	dule. Column (b) should al	ways show the fai	r market value of the goods	, other assets,	
			-	ed less than fair market vali				
column (d) the value of the goods,	other assets, or serv	ices received.					
(a)Line no	(b) Amount involved	(c) Name of	noncharitable	e exempt organization	(d) Descript	ion of transfers, transactions, ar	nd sharing arrange	ements
			N/A					
	<u>, , </u>							
				·				

						·		
					 	- 		
	·····							
								
2a is the fou	ndation directly or indirec	thy affiliated with or r	related to one	or more tax-exempt organ	uzations described			
	501(c) of the Code (other	•			nzationo dobbilbo	•	Yes [X No
	omplete the following sch	` ')(O))	1011 027	-			110
<u> </u>	(a) Name of or			(b) Type of organization	T	(c) Description of relatio	nship	
	N/A	94		(0) () [0]	 	(0) 2 3 3 3 7 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3		
	11/11				+			
					 			
					 		.,	
					 			
Unde	r penalties of periury. I declare	that I have examined the	ıs return, ıncludı	ng accompanying schedules an	d statements, and to	the best of my knowledge		
				in taxpayer) is based on all infor		arer has any knowledge	May the IHS discure turn with the pro	eparer
Here	Pathing	11.11.		1730 20	ul Dercei	ETARY	shown below (see	
	tature of officer or truster	2 CLES V		7-30-201	Title	EIAKI	L Yes	X No
	Print/Type preparer's n	<u> </u>	Preparer's s		Date	Check If PTI	N	
	Trinivitype preparer sin	aine	i reparer s s	signature	Date	self- employed	14	
Paid						Jon Uniployed		
Preparer	Frank and a		<u></u>		1	1		
Use Only	Firm's name					Firm's EIN ►		
USE OHIN	Firm's address							
	1 1111 2 4001622					Dhanasi		
	<u> </u>					Phone no.	Form 000 F	3E (0040)
							Form 990-F	· i= (2013)

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. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www irs gov/form990 -

OMB No 1545-0047

Name of the organization

Employer identification number

GSF FOUNDATION 46-0501728					
Organization type (check	k one):				
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number) organization				
	4947(a)(1) nonexempt chantable trust not treated as a private foundation	ion			
	527 political organization				
Form 990-PF	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt chantable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
Note, Only a section 501	n 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 S	Special Rule See instructions.			
General Rule					
_	tion filing Form 990, 990·EZ, or 990·PF that received, during the year, \$5,000 or n mplete Parts I and II.	nore (in money or property) from any one			
Special Rules					
509(a)(1) and 17	01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test 70(b)(1)(A)(vi) and received from any one contributor, during the year, a contributor (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and I	on of the greater of (1) \$5,000 or (2) 2%			
total contribution	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one of more than \$1,000 for use exclusively for religious, chantable, scientific, liter of cruelty to children or animals. Complete Parts I, II, and III.				
contributions for If this box is chi purpose Do no	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any or use exclusively for religious, charitable, etc., purposes, but these contributions ecked, enter here the total contributions that were received during the year for an orthogonal to the parts unless the General Rule applies to this organization able, etc., contributions of \$5,000 or more during the year	did not total to more than \$1,000. n exclusively religious, charitable, etc.,			
but it must answer "No"	on that is not covered by the General Rule and/or the Special Rules does not file Soon Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ dieet 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) (2013)

Employer identification number

GSF · FOUNDATION

GSF ·F	OUNDATION		-0501728
Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	AL-KHATIB FOUNDATION 3044 PAYNE RANCH ROAD CHINO HILLS, CA 91709	\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ARAMARK UNIFORM SERVICES 115 N. FIRST STREET BURBANK, CA 91502	\$ 20,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	BEECO 12360 E. END AVENUE CHINO, CA 91710	\$ 5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	BEMIS COMPANY, INC. ONE NEENAH CENTER, 4TH FLOOR NEENAH, WI 54957	\$\$,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	CHUCK BROWNE P.O. BOX 435 HERMANN, MO 65041	- \$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	COMPUTER SCIENCE CORPORATION 45154 UNDERWOOD LANE STERLING, VA 20166	- \$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
323452 10-2	24-13	Schedule B (Form	990, 990-EZ, or 990-PF) (2013)

Employer identification number

GSF 'FOUNDATION

Part I	Contributors	see instructions). Use duplicate copies of Part I if additional space is needed.
raili	Continuators	see instructions). Use duplicate copies of Part 111 additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	CRAFTSMEN TRAILER 3755 MUELLER ROAD ST. CHARLES, MO 63301	s25,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	FOOD SAFETY NET SERVICES 199 W. RHAPSPDY DRIVE SAN ANTONIO, TX 78216	\$5,500.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZiP + 4	(c) Total contributions	(d) Type of contribution
9	FRANK LISTI 1939 PORT TOWNSEND CIRCLE NEWPORT BEACH, CA 92660	\$12,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	GATEWAY INDUSTRIAL POWER 921 FOURNIE LANE COLLINSVILLE, IL 62234	\$ 25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	JOHN PAGE 19 WEDGEWOOD LANE LADERA RANCH, CA 92694	\$\$.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>12</u>	MARK WETTERAU 19 OLD RANCH ROAD LAGUNA NIGUEL, CA 92677	\$ 22,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.) 990, 990-EZ, or 990-PF) (2013)

Employer identification number

GSF · FOUNDATION

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is neede	ıs needed.
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(b)	(c)	
Name, address, and ZIP + 4	Total contributions	(d) Type of contribution
MORNING STAR PACKING 2211 OLD HIGHWAY 99 WEST WILLIAMS, CA 95987	\$25,000.	Person X Payroll
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
OLSON 420 N. 5TH STREET, SUITE 1000 MINNEAPOLIS, MN 55401	s20,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
PACKAGING CORPORATION OF AMERICA 4240 BANDINI BLVD. VERNON, CA 90058		Person X Payroll
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
RADO MECHANICAL GROUP 1400 FARMER ROAD NW CONYERS, GA 30012	\$5,000.	Person X Payroll
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
ROBERT WOLPERT 28391 AVENIDA LA MANCHA SAN JUAN CAPISTRANO, CA 92675	ss,	Person X Payroll
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
SIGMA NET 4290 BRICKELL STREET ONTARIO, CA 91761	\$ 7,500.	Person X Payroll
	MORNING STAR PACKING 2211 OLD HIGHWAY 99 WEST WILLIAMS, CA 95987 (b) Name, address, and ZIP+4 OLSON 420 N. 5TH STREET, SUITE 1000 MINNEAPOLIS, MN 55401 (b) Name, address, and ZIP+4 PACKAGING CORPORATION OF AMERICA 4240 BANDINI BLVD. VERNON, CA 90058 (b) Name, address, and ZIP+4 RADO MECHANICAL GROUP 1400 FARMER ROAD NW CONYERS, GA 30012 (b) Name, address, and ZIP+4 ROBERT WOLPERT 28391 AVENIDA LA MANCHA SAN JUAN CAPISTRANO, CA 92675 (b) Name, address, and ZIP+4 SIGMA NET 4290 BRICKELL STREET	MORNING STAR PACKING 2211 OLD HIGHWAY 99 WEST \$ 25,000.

Employer identification number

GSF · F	SF FOUNDATION 46-0501728		
Part I	Contributors (see instructions). Use duplicate copies of Part I if addition		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributi	(d) ons Type of contribution
<u>19</u>	TAYLOR FARMS		Person X Payroll
	911 BLANCO CIRCLE, SUITE B	\$\$	000. Noncash (Complete Part II for
	SALINAS, CA 93902		noncash contributions.)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributi	(d) ons Type of contribution
20	WAGNER SERVICE SOLUTIONS		Person X Payroll
	P.O. BOX 1556	. \$5,	Noncash (Complete Part II for
	COVINGTON, GA 30015		noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributi	(d) ons Type of contribution
21	ACRA AEROSPACE		Person X
	2121 E VIA BURTON	\$	Payroll Noncash
	ANAHEIM, CA 92806	.	(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribut	(d) ons Type of contribution
22	ALFRED BALDWIN	_	Person X
	280 NEWPORT CENTER DRIVE, SUITE 240	\$46,	Payroll
	NEWPORT BEACH, CA 92660	-	(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribut	(d) ions Type of contribution
23	AMERICAN HONDA MOTOR CO, INC.		Person X
	1919 TORRANCE, BLVD BLDG 100	_ \$5,	000. Payroll Noncash
	TORRANCE, CA 90501	-	(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribut	(d)
24	BIG BROTHERS BIG SISTERS OF ORANGE		_ (v)

323452 10-24-13

24

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

185,000.

Person Payroll

Noncash (Complete Part II for

noncash contributions.)

TUSTIN,

COUNTY

14131 YORBA STREET, STE. 200

CA 92780

Employer identification number

GSF FOUNDATION

r art r	Contributors (see instructions). Ose duplicate copies of rait in additional		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	BOULDER CITY SUNRISE ROTARY FOUNDATION PO BOX 60905, BOULDER CITY BOULDER CITY, NV 89006	\$31,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
26	CASEY RASMUSSEN 24752 HACIENDA LANE NEWHALL NEWHALL, CA 91321	\$9,655.	Person X Payroll (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
27	CHARLES RUCK 650 TOWN CENTER DRIVE 20TH FLOOR COSTA MESA, CA 92626	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
28	COURT APPOINTED SPECIAL ADVOCATES 1505 E. 17TH STREET SUITE 214 SANTA ANA, CA 92705	\$ 103,305.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
29	CSI ELECTRICAL CONTRACTORS, INC. PO BOX 2887 SANTA FE SPRINGS, CA 90670	\$15,537.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
30	CT REALTY CORPORATION 65 ENTERPRISE SUITE 150 ALISO VIEJO, CA 92656	\$ 5 , 400 . Schedule B (Form	Person X Payroll Complete Part II for noncash contributions.)

Employer identification number

GSF · FOUNDATION

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	ıl space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31	DYNALECTRIC ATTN: TED DONALD, 9505 CHESAPEAKE DR. SAN DIEGO, CA 92123	\$15,187.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
32	ENVIRONMENTAL CONSTRUCTION GROUP, INC. 3271 E. 19TH STREET SIGNAL HILL, CA 90755	\$12,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
33	FALCON TRUST PO BOX 50190 CASPER, WY 82605	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
34	HAYNIE & COMPANY ATTN: DON MCNERNEY, 4910 CAMPUS DR. NEWPORT BEACH, CA 92660	\$ 24,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) N o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
35	HELIX ELECTRIC PO BOX 85298 SAN DIEGO, CA 92186	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
36	HOLLENCREST SECURITIES, LLC GREG PELLIZZON, 100 BAYVIEW CIR., STE.500 NEWPORT BEACH, CA 92660	\$32,352.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
323452 10-	24-13	Schedule B (Form	990, 990-EZ, or 990-PF) (2013)

Employer identification number

GSF · FOUNDATION

Part I	Contributors	(see instructions). Use duplicate copies of Part I if additional space is needed.
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Part I	Contributors (see instructions). Use duplicate copies of Part Fif additions	ai space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
37	HONDA CENTER 2695 EAST KATELLA AVE ANAHEIM, CA 92806	\$ 25,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
38	HUNSAKER & ASSOCIATES 3 HUGHES IRVINE, CA 92618	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
39	MICHAEL WALL ENGINEERING, INC. 4115 SORRENTO VALLEY BLVD. SAN DIEGO, CA 92121	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
40	MIRACLES FOR KIDS 3002 DOW AVENUE, STE. 502 TUSTIN, CA 92780	\$ 339,004.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
41	MONTBLEA & ASSOCIATES, INC. 555 RAVEN ST. SAN DIEGO, CA 92102	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) <u>No.</u> _	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
323452 10-	MURRAY COMPANY 2919 E. VICTORIA ST, RANCHO DOMINGUEZ RANCHO DOMINGUEZ, CA 90221	\$ 14,074.	Person X Payroll

Employer identification number

GSF · FOUNDATION

46-0501728

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
43	NANCY AND GEOFFREY STACK FAMILY FOUNDATION, 18802 BARDEEN AVE. IRVINE, CA 92612	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
44	NEWPORT INVESTMENT ASSOCIATES 226 GRAND CANAL NEWPORT BEACH, CA 92662	\$56,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
45	ORANGEWOOD CHILDREN'S FOUNDATION 1575 E. 17TH STREET SANTA ANA, CA 92705	\$\$ <u>582,500.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
46	PACIFIC HOSPITALITY GROUP LLC 2532 DUPONT DRIVE IRVINE, CA 92612	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
47	QUEST SOFTWARE 5 POLARIS WAY ALISO VIEJO, CA 92656	\$25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
48	RD OLSON ATTN: JOSEPH CERVANTES, 2955 MAIN STREET, THIRD FLOOR, IRVINE, CA 92614	\$ 6,000.	Person X Payroll

Employer identification number

GSF · FOUNDATION

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is need	eded.
Part I	Contributors (see instructions). Use duplicate copies of Part 1 if additional space is nee	eaea

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
49	ROCKWELL DRYWALL, INC. 1341 W. ARROW HIGHWAY SAN DIMAS, CA 91773	\$6,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
50	SHAW & SONS CONCRETE CONTRACTORS ATTN: PAUL TAYLOR, 829 W. 17TH STREET, SUITE 5 COSTA MESA, CA 92627	\$ 23,849.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
51	SOUTH COUNTY OUTREACH 26776 VISTA TERRACE LAKE FOREST, CA 92630	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
52	STEVE SHARPE 28045 HARRISON PARKWAY VALENCIA, CA 91355	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
53	SUFFOLK CONSTRUCTION CO., INC. ATTN: RICK HAUSMAN, 3366 KURTZ STREET SAN DIEGO, CA 92110	\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>54</u>	THE DRANEY FAMILY FOUNDATION	10.000	Person X Payroll
323452 10-	BOULDER CITY, NY 89005	\$ 10,000.	(Complete Part II for noncash contributions)

Employer identification number

GSF · F	OUNDATION		-0501728
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	Il space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
55	THE WAYNE CLARK FAMILY FOUNDATION 68 LAVERONI CT. STE 200 NOVATO, CA 94949	\$ 50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
56	XEBEC REALTY PARTNERS, INC. 3010 OLD RANCH PARKWAY, STE 470 SEAL BEACH, CA 90740	\$5,000.	Person X 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 Oncash 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 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.)

Employer identification number

${\tt GSF} \cdot {\tt FOUNDATION}$

Part II	Noncash Property	(see instructions). Use duplicate copies of Part II if additional space is needed.
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(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
		\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Part I			
_			
		ì	1

(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 ZIP + 4	Relationship of transferor to transferee

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient GENERAL SUPPORT AUTISM SOCIETY OF NORTH CAROLINA PC 505 OBERLIN ROAD, #230 3,000. RALEIGH, NC 27605 ÞС GENERAL SUPPORT BACKPACKS/UNITED STATIONERS CHARITABLE TRUST ONE PARKWAY NORTH BLVD 196,443. DEERFIELD, IL 60015 GENERAL SUPPORT ÞС BEST FOOT FORWARD 21441 BOCA RIO ROAD 28,696. BOCA RATON, FL 33433 GENERAL SUPPORT ÞС BIG BROTHERS/BIG SISTERS 14131 YORBA STREET, SUITE 200 185,859. TUSTIN, CA 92780 РC GENERAL SUPPORT BLACKHURST ELEMENTARY 2000 ELM STREET 5,322. ST. CHARLES, MO 63301 ₽C GENERAL SUPPORT BOOKS DONATION - VARIOUS SCHOOLS 600. GENERAL SUPPORT ₽C BOY SCOUTS OF AMERICA 1211 E. DYER ROAD 3,000. SANTA ANA, CA 92705 РC GENERAL SUPPORT BOY SCOUTS OF AMERICA 1800 CIRCLE 75 PARKWAY 20,000. ATLANTA, GA 30339 BOYS & GIRLS CLUB РC GENERAL SUPPORT 250 N. GOLDEN CIRCLE, #104 5,863. SANTA ANA, CA 92705 BOYS AND GIRLS CLUB OF METRO ATLANTA GENERAL SUPPORT 100 EDGEWOOD AVENUE, #700 15,000. ATLANTA, GA 30303 2,123,200. Total from continuation sheets

3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
BOYS HAVEN		PC	GENERAL SUPPORT	
2301 GOLDSMITH LANE				
LOUISVILLE, KY 40218				10,000
BUILD-A-BIKE - VARIOUS SCHOOLS		PC	GENERAL SUPPORT	
				111,756
DULY DYNG DA TA		DC.	CENEDAL CURRORM	
BUILDING BAJA 325 PONCE DE LEON BLVD, STE, 302		PC	GENERAL SUPPORT	
CORAL GABLES, FL 33134				170,000
CASA FOR CHILDREN		₽C	GENERAL SUPPORT	
100 W. HARRISON STREET, NORTH TOWER,				116 720
#500 SEATTLE, WA 98119		<u> </u>		116,729
CHILD ABUSE PREVENTION CENTER		PC	GENERAL SUPPORT	
500 S. MAIN STREET, SUITE 1100		j		j
ORANGE, CA 92868		<u> </u>		2,000
CHILDREN'S HEALTHCARE OF ATLANTA 1687 TULLIE CIRCLE NE		PC	GENERAL SUPPORT	
ATLANTA, GA 30329				25,000
]		
CHP 11-99 FOUNDATION		PC	GENERAL SUPPORT	
2244 NORTH STATE COLLEGE BLVD. FULLERTON, CA 92831				25,000
CHRISTIAN OKOYE		₽C	GENERAL SUPPORT	
10082 BIG PINE DRIVE				
ALTA LOMA, CA 91737		 	 	2,500
COMFORT ZONE CAMP		₽C	GENERAL SUPPORT	
20695 S. WESTERN STREET, #145		1		
TORRANCE, CA 90503		 		3,000
COMMUNITY OF HOPE MINISTRIES P.O. BOX 1004		PC	GENERAL SUPPORT	
GARNER, NC 27529				3,000
Total from continuation sheets				

3 Grants and Contributions Paid During the Y		T		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
DICKERSON CENTER FOR CHILDREN		PC	GENERAL SUPPORT	
1615 AUGUSTA ROAD				
WEST COLUMBIA, SC 29169				2,500
DREAM RIDERS		PC	GENERAL SUPPORT	
156 SANDY HILL ROAD LEXINGTON, SC 29072				5,495
BERINGTON, BC 25072				, , , ,
FAMILY PROMISE		PC	GENERAL SUPPORT	
161 S. ORANGE STREET			DINERUM BOTTON	
ORANGE, CA 92866				5,000
FOUNDATION FOR THE CHILDREN OF THE		₽C	GENERAL SUPPORT	
CALIFORNIAS				
2555 CAMINO DEL RIO SOUTH, SUITE 210				
SAN DIEGO, CA 92108				12,500
GIRL SCOUTS OF GREATER ATLANTA		₽C	GENERAL SUPPORT	
5601 N. ALLEN ROAD				
MABELTON, GA 30126				8,000
GOALS FOR LIFE		PC	GENERAL SUPPORT	
13100 STUDEBAKER ROAD				2,500
NORWALK, CA 90650		1		2,300
WARDY WANDON MIL BY THE		₽C	GENERAL SUPPORT	
P.O. BOX 2641			SENERAL BULLONI	
COLUMBIA, SC 29202				5,00
HARVEST HOPE FOOD BANK		₽C	GENERAL SUPPORT	
P.O. BOX 451		1		
COLUMBIA, SC 29202		+		3,92
HEALTHY LEARNERS		PC	GENERAL SUPPORT	
2749 LAUREL STREET				3,50
COLUMBIA, SC 29204		 		7,30
HOLY ANGELS		PC	GENERAL SUPPORT	
HOLY ANGELS 6600 WILKINSON BLVD		[SERVICED SOFFORT	
BELMONT, NC 28012				50
Total from continuation sheets	<u> </u>		• • • • • • • • • • • • • • • • • • • •	

3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
HORSE TIME		PC	GENERAL SUPPORT	
10385 HIGHWAY 278 EAST				
COVINGTON, GA 30014				7,500
HUMAN OPTIONS P.O. BOX 53745		PC	GENERAL SUPPORT	
IRVINE, CA 92619				2,500
INNOVATIVE SERVICE N.W.		PC	GENERAL SUPPORT	
9414 NE FOURTH PLAIN ROAD				
VANCOUVER, WA 98662			-	1,500
J.F. SHEA THERAPEUTIC RIDING CENTER		PC	GENERAL SUPPORT	
26284 OSO ROAD	}			5 000
SAN JUAN CAPISTRANO, CA 92675				5,000
KID MODAG		₽C	GENERAL, SUPPORT	
KID WORKS 1902 W. CHESTNUT AVENUE			GENERAL SUFFORT	
SANTA ANA, CA 92703				5,000
LAURA'S HOUSE		PC	GENERAL SUPPORT	
999 CORPORATE DRIVE, #225				
LADERA RANCH, CA 92694				5,000
LEAP LEARNING CENTER 1221 WASS STREET		PC	GENERAL SUPPORT	
TUSTIN, CA 92780				2,500
LINDQUIST DENTAL CLINIC		PC	GENERAL SUPPORT	
130 131ST STREET SOUTH			Ì	
TACOMA, WA 98444		<u> </u>		7,500
LOVE OUR CHILDREN INC. 2650 S. MYRTLE AVENUE, #B3		PC	GENERAL SUPPORT	
MONROVIA, CA 91016				2,500
MARY CARIOLA CHILDREN CENTER INC.		₽C	GENERAL SUPPORT	
1000 ELMWOOD AVENUE				
ROCHESTER, NY 14620 Total from continuation sheets			<u> </u>	3,008

Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor GENERAL SUPPORT MARYVALE REVITALIZATION CORP ÞС 3454 N. 51ST AVENUE, #130 2,500. PHOENIX, AZ 85031 GENERAL SUPPORT ÞС MATER DEI HIGH SCHOOL 1202 W. EDINGER AVENUE 500. SANTA ANA, CA 92707 ME FINE FOUNDATION INC. РC GENERAL SUPPORT 5100 US HIGHWAY 70 EAST 5,000. PRINCETON, NC 27569 MERCY HOME FOR BOYS AND GIRLS РC GENERAL SUPPORT 1140 W. JACKSON BLVD. 2,000. CHICAGO, IL 60607 РC GENERAL SUPPORT MIKA COMMUNITY DEVELOPMENT 1718 MONROVIA AVENUE 2,000. COSTA MESA, CA 92627 GENERAL SUPPORT MIRACLES FOR KIDS ÞС 3002 DOW AVENUE, SUITE 502 283,885. TUSTIN, CA 92780 MULTICARE HEALTH FOUNDATION ÞС GENERAL SUPPORT 402 15TH AVENUE SE, SUITE 101 5,000. PUYALLUP, WA 98371 MUSCULAR DYSTROPHY PC GENERAL SUPPORT 4800 SW MACADAM, #350 1,600. PORTLAND, OR 92739 GENERAL SUPPORT NANCY PERRY CHILDREN'S SHELTER P.O. BOX 344 2,500. LEXINGTON, SC 29071 GENERAL SUPPORT NATIONAL FIRE SAFETY COUNCIL P.O. BOX 378 300. MICHIGAN CENTER, MI 49254 Total from continuation sheets

Part XV Supplementary Information 3 Grants and Contributions Paid During the You				 -
Recipient	If recipient is an individual,	Face and a	D	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	Or Substantial Contributor	recipient		
OC COMMUNITY HOUSING CORP		₽C	GENERAL SUPPORT	
1833 E. 17TH STREET, #207		ľ	DIAMETER DOLLOW	
SANTA ANA, CA 92705				5,000
OC RESCUE MISSION		PC	GENERAL SUPPORT	}
ONE HOPE DRIVE				
TUSTIN, CA 92782				2,500
OPERATION WARM		₽C	GENERAL SUPPORT	
1653 BRINTONS BRIDGE ROAD				
CHADDS FORD, PA 19317				16,661
ORANGEWOOD CHILDREN'S FOUNDATION		PC	GENERAL SUPPORT	
1575 E. 17TH STREET				474 020
SANTA ANA, CA 92705				474,029
PAJAMA PROJECT		PC	GENERAL SUPPORT	
114 EAST 39TH STREET		[DEREIGIE BOTTORT	
NEW YORK, NY 10016				160
PEDIATRIC BRAIN TUMOR FOUNDATION		₽C	GENERAL SUPPORT	
302 RIDGEFIELD COURT				1
ASHEVILLE, NC 28806				1,500
PEDIATRIC CANCER RESEARCH FOUNDATION		₽C	GENERAL SUPPORT	
9272 JERONIMO ROAD, SUITE A-107 IRVINE, CA 92618				1,000
PERRIS ELEMENTARY		PC	GENERAL SUPPORT	
143 EAST 1ST STREET				
PERRIS, CA 92570				1,287
				1
PHOENIX HOUSE		₽C	GENERAL SUPPORT	
1207 E. FRUIT STREET SANTA AND CA 92701				5,000
SANTA ANA, CA 92701		 	 	3,000
PROVIDENCE SPEECH AND HEARING CENTER		₽C	GENERAL SUPPORT	
1301 PROVIDENCE AVENUE		ſ	Tanana Borrowi	
ORANGE, CA 92868				6,200
Total from continuation sheets		<u> </u>		

Supplementary Information Grants and Contributions Paid During the Year (Continuation) 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 GENERAL SUPPORT PURE GAME ÞС 14 TRICOLORED LANE 2,500. ALISO VIEJO, CA 92656 ÞС GENERAL SUPPORT RMHC - ATLANTA, GA 792 HOUSTON MILL ROAD ATLANTA, GA 30329 28,360. RMHC - AUGUSTA PC GENERAL SUPPORT P.O. BOX 14189 AUGUSTA, GA 30919 3,500. RMHC - BUFFALO ₽C GENERAL SUPPORT 780 W. FERRY STREET BUFFALO, NY 14222 5,800. RMHC - CENTRAL NEW YORK ÞС GENERAL SUPPORT 1027 E. GENESEE STREET SYRACUSE, NY 13210 3,000. ÞС GENERAL SUPPORT RMHC - CHAPEL HILL, NC 101 OLD MISSION FARM ROAD CHAPEL HILL, NC 27514 3,000. ÞС GENERAL SUPPORT RMHC - CHARLESTON, SC 81 GADSDEN STREET CHARLESTON, SC 29401 3,500. RMHC - CHARLOTTE, NC РC GENERAL SUPPORT P.O. BOX 35129 CHARLOTTE, NC 28235 3,500. RMHC - CHICAGO ₽C GENERAL SUPPORT 1900 SPRING ROAD, #310 OAK BROOK, IL 60523 29,000. RMHC - COLUMBIA, SC ₽C GENERAL SUPPORT 1529 HAMPTON STREET, SUITE 2001 4,000. COLUMBIA, SC 29201 Total from continuation sheets

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
RMHC - DURHAM, NC		P C	GENERAL SUPPORT	
506 ALEXANDER AVENUE				
DURHAM, NC 27705		<u> </u>		3,000
RMHC - EASTERN IOWA		PC	GENERAL SUPPORT	
730 HAWKINS DRIVE			BENERAL SOFFORT	
IOWA CITY, IA 52246		i .		1,000
RMHC - EASTERN WI		₽C	GENERAL SUPPORT	
8948 WATERTOWN PLANK ROAD				}
WAUWATOSA, WI 53226				4,000
RMHC - GREENVILLE, NC		PC	GENERAL SUPPORT	
549 MOYE BLVD. GREENVILLE, NC 27834				3,000
GREENVILLE, NC 27034				3,000
RMHC - GREENVILLE, SC		PC	GENERAL SUPPORT	
706 GROVE ROAD			SERVERGE BOTTORT	
GREENVILLE, SC 29605				3,500
RMHC - HAWAII		₽C	GENERAL SUPPORT	
1970 JUDD HILLSIDE ROAD				
HONOLULU, HI 96822				5,000
			Thirth I gunnong	
RMHC ~ LAS VEGAS 2323 POTOSI STREET		PC	GENERAL SUPPORT	
LAS VEGAS, NV 89146				5,000
RMHC ~ LOMA LINDA		₽C	GENERAL SUPPORT	
11365 ANDERSON STREET				3.35
LOMA LINDA, CA 92354			 	3,250
RMHC ~ MADISON	1	₽C	CEMEDAL CHODODO	
2716 MARSHALL COURT		F.C.	GENERAL SUPPORT	
MADISON, WI 53705				2,000
RMHC - MARSHFIELD		PC	GENERAL SUPPORT	
803 W. NORTH STREET				
MARSHFIELD, WI 54449 Total from continuation sheets		1		1,00

3 Grants and Contributions Paid During the	Year (Continuation)		···•	
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	A=
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
RMHC - NORFOLK		₽C	GENERAL SUPPORT	
404 COLLEY AVENUE				
NORFOLK, VA 23507				3,00
DIGIG OD WAT COTHEY		PC	GENERAL SUPPORT	
RMHC - ORANGE COUNTY			SENERAL SOFFORT	
383 S. BATAVIA ORANGE, CA 92868				1,00
JANUE, CA 92000				
RMHC - RICHMOND		₽C	GENERAL SUPPORT	
2330 MONUMENT AVENUE		1	1	
RICHMOND, VA 23220				3,00
RMHC - ROANOKE		PC	GENERAL SUPPORT	1
2224 S. JEFFERSON STREET				3,00
ROANOKE, VA 24014		-		3,00
RMHC - ROCHESTER		PC	GENERAL SUPPORT	
333 WESTMORELAND DRIVE				
ROCHESTER, NY 14620				2,00
RMHC - SAVANNAH		PC	GENERAL SUPPORT	
4710 WATERS AVENUE				3 50
SAVANNAH, GA 31404				3,50
RMHC - SOUTHERN APPALACHIAN		₽C	GENERAL SUPPORT	
418 N. STATE OF FRANKLIN ROAD				
JOHNSON CITY, TN 37604				3,50
RMHC - SOUTHWEST FL		₽C	GENERAL SUPPORT	
16100 ROSERUSH COURT				1
FORT MYERS, FL 33908				2,30
RMHC - WESTERN WA/ALASKA		PC	GENERAL SUPPORT	
5130 40TH AVENUE NE				
SEATTLE, WA 98105				5,76
RMHC - WINSTON-SALEM, NC		₽C	GENERAL SUPPORT	
419 S. HAWTHORNE ROAD				3 0
WINSTON-SALEM, NC 27103 Total from continuation sheets			L	3,00

3 Grants and Contributions Paid During the \		T		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
ROYAL FAMILY KIDS CAMP		PC	GENERAL SUPPORT	
1850 45TH AVENUE NE				
SALEM, OR 97305				1,50
across monay's paper amang		DC.	GENERAL SUPPORT	
SCHOOL TODAY'S FRESH START		PC	GENERAL SUPPORT	
4514 CRENSHAW BLVD			İ	3.64
LOS ANGELES, CA 90043				3,64
SEGERSTROM CENTER FOR THE ARTS		PC	GENERAL SUPPORT	
600 TOWN CENTER DRIVE				
COSTA MESA, CA 92626		-		3,00
SHOES THAT FIT		₽C	GENERAL SUPPORT	
1420 N. CLAREMONT BLVD., SUITE 107B				
CLAREMONT, CA 91711				21,39
SOUTH COUNTY OUTREACH		PC	GENERAL SUPPORT	
26776 VISTA TERRACE				ļ
LAKE FOREST, CA 92630				34,21
SPECIAL OLYMPICS		PC	GENERAL SUPPORT	
P.O. BOX 2006				1
SANTA MONICA, CA 90406		 		1,00
GDIDIM LENGUE		PC	GENERAL SUPPORT	
P.O. BOX 3766		F C	SEMERAL SOLIORI	
MISSION VIEJO, CA 92690				2,00
SPIRITT FAMILY SERVICES - EL MONTE		PC PC	GENERAL SUPPORT	
2000 S. TYLER AVENUE		1		1
EL MONTE, CA 91733				5,00
TALK ABOUT CURING AUTISM		PC	GENERAL SUPPORT	
2222 MARTIN, SUITE 140				
IRVINE, CA 92612				3,00
		70	DEVIEDAT GEODOS	
TAMPA GENERAL HOSPITAL FOUNDATION PO BOX 1289		PC	GENERAL SUPPORT	
TAMPA, FL 33601				50
Total from continuation sheets		<u> </u>		

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor TEAM KIDS РC GENERAL SUPPORT 2192 MARTIN, SUITE 280 IRVINE, CA 92612 3,000. THE COOP FOUNDATION INC PC GENERAL SUPPORT 162 N. RAYMOND AVENUE 1,000. FULLERTON, CA 92831 THE PAINTED TURTLE ÞС GENERAL SUPPORT 1300 4TH STREET, SUITE 300 SANTA MONICA, CA 90401 11,250. THE SPRING OF TAMPA BAY ₽C GENERAL SUPPORT PO BOX 5147 TAMPA, FL 33675 4,000. TOYS FOR TOTS ₽C GENERAL SUPPORT 18251 QUANTICO GATEWAY DRIVE TRIANGLE, VA 22172 505. TRINITY CAFE РC GENERAL SUPPORT 100 E. MADISON STREET TAMPA, FL 33602 4,000. РC GENERAL SUPPORT UNITED CEREBRAL PALSY 980 ROOSEVELT #100 900. IRVINE, CA 92620 WE'RE REACHING OUT ₽C GENERAL SUPPORT 1022 SW 147 PLACE MIAMI, FL 33196 500. WHITEWATER COMMUNITY FOUNDATION ₽C GENERAL SUPPORT 207 W. MAIN STREET WHITEWATER, WI 53190 25,000. WILSON COMMENCEMENT PARK PC GENERAL SUPPORT 251 JOSEPH AVENUE ROCHESTER, NY 14605 1,500. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation status of Purpose of grant or contribution Amount Name and address (home or business) recipient GENERAL SUPPORT РC YMCA OF GARNER 1701 AVERSBORO ROAD 2,000. GARNER, NC 27529 YMCA OF OC РC GENERAL SUPPORT 13821 NEWPORT AVENUE, SUITE 200 5,000. TUSTIN, CA 92780 Total from continuation sheets

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CAS	H INVE	STMENTS	STATEMENT	1
SOURCE	(A REVE PER B	NUE NE			(C) ADJUSTED NET INCOME	
BANK OF THE WEST		646.		646.		0.
TOTAL TO PART I, LINE 3		646.		646.		0.
FORM 990-PF	OTHER I	NCOME			STATEMENT	2
DESCRIPTION		(A) REVENUE PER BOOKS		(B) INVEST- TINCOME		
AUCTION PROCEEDS - STARS & ST	TRIPES	313,31	4.	0	•	
TOTAL TO FORM 990-PF, PART I,	LINE 11	313,31	4.	0	•	
FORM 990-PF	TAX	ŒS			STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS			(C) ADJUSTED NET INCOM	(D) CHARIT E PURPO	
TAX ON INVESTMENT INCOME CALIFORNIA LICENSE FEE	6. 10.		0.	0.		0. 10.
TO FORM 990-PF, PG 1, LN 18	16.		0.		0.	10.
FORM 990-PF	OTHER E	OTHER EXPENSES S			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO	NVEST- ADJUST			
FUND RAISING EXPENSES BANK CHARGES ADMINSTRATIVE EXPENSES	1,234,616 33,241 387,607	•	0. 0. 0.		0. 1,193, 0. 33, 0. 379,	159.
TO FORM 990-PF, PG 1, LN 23	1,655,464	•	0.		0. 1,606,	891.
		= =====				

FORM 990-PF	PART V TRU	III - STEES	LIST AND I	OF OFFICERS, FOUNDATION MA	DIRECTORS NAGERS	STATI	EMENT 5
NAME AND ADDRESS				TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
MARK WETTERAU 18301 VON KARMAN IRVINE, CA 92612	AVENUE,	STE.	1100	CHAIRMAN/DIR	ECTOR 0.	0.	0.
CHARLES BROWNE 18301 VON KARMAN IRVINE, CA 92612	AVENUE,	STE.	1100	EXECUTIVE DIS	RECTOR 0.	0.	0.
CATHERINE DUFFY 18301 VON KARMAN IRVINE, CA 92612	AVENUE,	STE.	1100	SECRETARY 2.00	0.	0.	0.
LISA GOTTLIEB 18301 VON KARMAN IRVINE, CA 92612	AVENUE,	STE.	1100	CFO/DIRECTOR 2.00		0.	0.
ALI SAYEDI 18301 VON KARMAN IRVINE, CA 92612				DIRECTOR 1.00	0.	0.	0.
FRANK LISTI 18301 VON KARMAN IRVINE, CA 92612		STE.		DIRECTOR 1.00	0.	0.	0.
STEVE BECKER 18301 VON KARMAN IRVINE, CA 92612	AVENUE,	STE.	1100	DIRECTOR 1.00	0.	0.	0.
MIKE WAITUKAITIS 18301 VON KARMAN IRVINE, CA 92612	AVENUE,				0.	0.	0.
BILL POCILUJKO 18301 VON KARMAN IRVINE, CA 92612				DIRECTOR 1.00	0.	0.	0.
BILL SANDERSON 18301 VON KARMAN IRVINE, CA 92612				DIRECTOR 1.00	0.	0.	0.
DANIEL VAN HOOZE 18301 VON KARMAN IRVINE, CA 92612	AVENUE,			DIRECTOR 1.00	0.	0.	0.

GSF FOUNDATION							46-05017	728
GREGG TARLTON 18301 VON KARMAN IRVINE; CA 92612	AVENUE,	STE.	1100	DIRECTOR 1.00		0.	0.	0.
JEFF STEINER 18301 VON KARMAN IRVINE, CA 92612	AVENUE,	STE.	1100	DIRECTOR 1.00		0.	0.	0.
JIM BROOKS 18301 VON KARMAN IRVINE, CA 92612	AVENUE,	STE.	1100	DIRECTOR 1.00		0.	0.	0.
JIM FUSTING 18301 VON KARMAN IRVINE, CA 92612	AVENUE,	STE.	1100	DIRECTOR 1.00		0.	0.	0.
JOE MICHEL 18301 VON KARMAN IRVINE, CA 92612	AVENUE,	STE.	1100	DIRECTOR 1.00		0.	0.	0.
JOHN MURPHY 18301 VON KARMAN IRVINE, CA 92612	AVENUE,					0.	0.	0.
JOHN PAGE 18301 VON KARMAN IRVINE, CA 92612	AVENUE,	STE.	1100	ASST. SEC	RETARY/DIRECTO	OR 0.	0.	0.
LARRY MCGILL 18301 VON KARMAN IRVINE, CA 92612				DIRECTOR 1.00		0.	0.	0.
LARRY ROSE 18301 VON KARMAN IRVINE, CA 92612	AVENUE,	STE.	1100	DIRECTOR 1.00		0.	0.	0.
MICKEY HAMER 18301 VON KARMAN IRVINE, CA 92612		STE.	1100	DIRECTOR 1.00		0.	0.	0.
NEIL CRACKNELL 18301 VON KARMAN IRVINE, CA 92612		STE.		DIRECTOR 1.00		0.	0.	0.
PAUL SESTAK 18301 VON KARMAN IRVINE, CA 92612	-	STE.		DIRECTOR 1.00		0.	0.	0.
PETE DELGIORNO 18301 VON KARMAN IRVINE, CA 92612				DIRECTOR 1.00		0.	0.	0.

GSF FOUNDATION		46-05017		01728
SCOTT THOMAS 18301 VON KARMAN AVENUE, STE. 1100 IRVINE, CA 92612	DIRECTOR 1.00	0.	0.	0.
SHELLIE FREY 18301 VON KARMAN AVENUE, STE. 1100 IRVINE, CA 92612	DIRECTOR 1.00	0.	0.	0.
TERRY WILSON 18301 VON KARMAN AVENUE, STE. 1100 IRVINE, CA 92612	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	0.	0.	0.