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

OMB No 1545-0052

Internal Revenue Service

▶ 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.

Open to Public Inspection

Ē	ог (calend	lar year 2014 or tax year beginning , a	and ending			<u> </u>	
-	Nar	ne of fou	indation			A Empl	oyer identification number	
_	S	ECO	ND CORE FOUNDATION			45	-5334640	
			street (or P O box number if mail is not delivered to street address)		Room/suite		hone number (see instruction	s)
_			EAST BIDWELL STREET		100231	91	<u>6-878-6693 </u>	
	•		, state or province, country, and ZIP or foreign postal code			C If exe	mption application is pending,	, check here
-	_	<u>OLS</u>				ł	-	
(3 C	heck		rn of a former public	charity	D 1. Fo	preign organizations, check he	ere 🕨 🔛
			Final return Amended			I .	oreign organizations meeting t	
_			Address change Name cha	inge		85	6% test, check here and attack	n computation
ŀ	1 0	heck	type of organization. $f X$ Section 501(c)(3) exempt private	foundation		E If priva	ate foundation status was terr	minated under
		Section	n 4947(a)(1) nonexempt charitable trust Other taxable	e private foundation	1	sectio	n 507(b)(1)(A), check here	▶ _
ı	Fa	air mai	ket value of all assets at J Accounting method	Cash X A	ccrual	F If the	foundation is in a 60-month te	ermination
	er	nd of y	ear (from Part II, col (c), Other (specify)			under	section 507(b)(1)(B), check h	nere 🕨 📘
_	lin	e 16)	\$ 707,236 (Part I, column (d) must	be on cash basis)				
•	P	art f	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Net in		(-) Administration	(d) Disbursements
			amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	(D) Net In		(c) Adjusted net income	for charitable purposes
-					\ <u></u>			(cash basis only)
		1	Contributions, gifts, grants, etc., received (attach schedule)	252,29	75			
		2	Check ▶ ☐ If the foundation is not required to attach Sch B					
		3	Interest on savings and temporary cash investments					
		4	Dividends and interest from securities	13,11		13,117		
		5a	Gross rents	, ,	-			
	ne	b	Net rental income or (loss)	01 50				
	Revenue	6a	Net gain or (loss) from sale of assets not on line 10	21,50)7			
	Š	b	Gross sales price for all assets on line 6a 206, 407			01 505		
	Ř	7	Capital gain net income (from Part IV, line 2)			21,507		
CA		8	Net short-term capital gain				0	
S		9	Income modifications					
SCANNED		10a	Gross sales less returns and allowances					
Ź		b	Less Cost of goods sold					
Щ		C	Gross profit or (loss) (attach schedule)					
		11	Other income (attach schedule)	206 01		24 624		
AÜG		12	Total. Add lines 1 through 11	286,91		34,624	0	
61	es	13	Compensation of officers, directors, trustees, etc.		0		<u></u>	<u> </u>
%	benses	14	Other employee salaries and wages		-			
~	Бе	15	Pension plans, employee benefits	0.0				<u></u>
<u>S</u>	Ж	16a	Legal fees (attach schedule) See Stmt 1	89				
S	Ģ	b	Accounting fees (attach schedule) Other professional fees (attach schedule) Stmt 2 Stmt 3	4,61		2 205		
	훒	C	· · · · · · · · · · · · · · · · · · ·	2,38	35	2,385		
	str	17	Taxes (attach schedule) (see instructions), S'Emt 4	16				,
	Ĕ	18		15	27		 -	
	Ξ	19	Depreciation (attach schedule) and depletion	1				
	¥	20	Occupancy Travel, conferences, and meetings	<u> </u>				
	ğ	21	Protes and publications): -1			.,	<u> </u>
	ਰ	22	Finding and publications	. 1 64				7 (42
	Operating and Administrative Ex	23	Other expenses (att. sch.) Stmt 5	1,64	:3			1,643
	ati	24	Total operating and administrative expenses.	9,69		2 20-	0	
	e l	٦.	Add lines 13 through 23			2,385	<u>U</u>	1,643
	ō	25	Contributions, gifts, grants paid See Statement 6	172,42		2 305		172,421
-		26	Total expenses and disbursements. Add lines 24 and 25	182,11		2,385	<u> </u>	174,064
		27	Subtract line 26 from line 12:	104 90	7			
		l a	Excess of revenue over expenses and disbursements	104,80		22 220		
		b	Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)			32,239	0	
		l c	Autusted net income (ii negative, enter -U-)		I	1	(1)	

	Part II	Balance Sheets Attached schedules and amounts in the description column should be for and of year amounts only (See instructions.)	Beginning of year	End of	year
	+ 401 L XI	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
ı	1	Cash – non-interest-bearing	252,085	5,702	5,702
ı	2	Savings and temporary cash investments			······
	3	Accounts receivable ▶		}	
		Less allowance for doubtful accounts ▶			
١	4	Pledges receivable ▶			
-		Less: allowance for doubtful accounts ▶			
- 1	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see			
		instructions)			
	7	Other notes and loans receivable (att. schedule)			
		Less. allowance for doubtful accounts ▶ 0			
छ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ž	10a	Investments – U.S. and state government obligations (attach schedule)			
ı	b	Investments – corporate stock (attach schedule) See Stmt 7	167,694	440,218	435,993
ŀ	C	Investments – corporate bonds (attach schedule) See Stmt 8	151,062	190,397	183,013
	11	Investments – land, buildings, and equipment basis	, , , , , , , , , , , , , , , , , , , ,		
		Less: accumulated depreciation (attach sch.)			
-	12	Investments – mortgage loans			
- 1	13	investments – other (attach schedule) See Statement 9	30,150	69,481	82,528
- 1	14	Land, buildings, and equipment basis			
ı		Less: accumulated depreciation (attach sch.)			
١	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers – see the			
١		instructions Also, see page 1, item I)	600,991	705,798	707,236
٦	17	Accounts payable and accrued expenses			
١	18	Grants payable			
Liabilities	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
읪	21	Mortgages and other notes payable (attach schedule)			
7	22	Other liabilities (describe ▶)			
	23	Total liabilities (add lines 17 through 22)	0	0	
٦		Foundations that follow SFAS 117, check here			
ဖွ		and complete lines 24 through 26 and lines 30 and 31.			
nces	24	Unrestricted	600,991	705,798	
흶	25	Temporarily restricted			
Net Assets or Fund Bala	26	Permanently restricted			
림		Foundations that do not follow SFAS 117, check here			
띄		and complete lines 27 through 31.			
힐	27	Capital stock, trust principal, or current funds			
뙮	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
SSI	29	Retained earnings, accumulated income, endowment, or other funds			
ايد	30	Total net assets or fund balances (see instructions)	600,991	705,798	
ž	31	Total liabilities and net assets/fund balances (see	-	-	
١		instructions)	600,991	705,798	
_	Part I				
		net assets or fund balances at beginning of year – Part II, column (a), line 30 (mu	st agree with		
•		f-year figure reported on prior year's return)	· J · = = ·······	1	600,991
2		amount from Part I, line 27a		2	104,807
		increases not included in line 2 (itemize) ▶		3	
		nes 1, 2, and 3		4	705,798
		eases not included in line 2 (itemize)		5	
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (l	b), line 30	6	705,798
					000 DE

Part IV Capital Gains a	nd Losses for Tax on Investn	nent Income_					 _
	ribe the kind(s) of property sold (e.g., real estate, arehouse, or common stock, 200 shs MLC Co.)			(b) How acquired P – Purchase D – Donation		Date acquired no , day, yr)	(d) Date sold (mo , day, yr)
1a See Worksheet							
<u>b</u>							<u> </u>
<u>c</u>							+
d e							+
(e) Gross sales price	(f) Depreciation allowed (or allowable)			other basis			in or (loss) (f) minus (g)
a							
b							
<u>c</u>							
e							
	g gain in column (h) and owned by the	foundation on 12/	/31/6	9	-	(I) Gains (Co	ol (h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69			s of col (i) (j), if any		col (k), but no	ot less than -0-) or from col (h))
а							
<u>b</u>			_				
<u>c</u>							
e		·					
2 Capital gain net income or (net o	apital loss) If gain, also enter if (loss), enter -0- i		}	<u></u>	2		21,507
3 Net short-term capital gain or (lo	ss) as defined in sections 1222(5) and		•				
- '	, column (c) (see instructions) If (loss)	, enter -0- ın	}				
Part V Qualification U	nder Section 4940(e) for Redu]		3		3,077
If "Yes," the foundation does not qua	tion 4942 tax on the distributable amou	olete this part					Yes X No
1 Enter the appropriate amount in	each column for each year, see the ins	tructions before n	nakır	ig any entries	—-т		(4)
Base period years Calendar year (or tax year beginning in			value	(c) of noncharitable-use asset			(d) stribution ratio divided by col (c))
2013	136	5,379		429,			0.317604
2012 2011				29,	353		
2010				·			 -
2009				<u></u>			
2 Total of line 1, column (d)						2	0.317604
	5-year base period – divide the total or nas been in existence if less than 5 yea		the			3	0.158802
4 Enter the net value of noncharita	ble-use assets for 2014 from Part X, lir	ne 5				4	568,246
5 Multiply line 4 by line 3						5	90,239
6 Enter 1% of net investment incom	me (1% of Part I, line 27b)				,	6	322
7 Add lines 5 and 6						7	90,561
	n Part XII, line 4 n line 7, check the box in Part VI, line 1	b, and complete t	that ¡	part using a 1% tax r	ate S	8 ee the	174,064
Part VI instructions							

Form	990-PF (2014) SECOND CORE FOUNDATION 45-5334640			<u>P</u>	<u>age 4</u>
Pa	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)				
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.	·		·	•
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check				322
	here ▶ X and enter 1% of Part I, line 27b				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of				
	Part I, line 12, col. (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0
3	Add lines 1 and 2				322
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-				322
6	Credits/Payments.				
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a				
b	Exempt foreign organizations – tax withheld at source 6b				
C	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments. Add lines 6a through 6d				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				322
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 2015 estimated tax ▶ Refunded ▶ 11				
_ ₽≉	nt 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			Yes	No
	participate or intervene in any political campaign?		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see				
	Instructions for the definition)?		1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities.				
С	Did the foundation file Form 1120-POL for this year?		1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation ▶ \$ (2) On foundation managers. ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers. > \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	_ ,_	4a		X
b	\cdot	N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				
_	conflict with the state law remain in the governing instrument?		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) CA				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"				
	complete Part XIV		9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses		10		X

Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its

the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

foundation had excess business holdings in 2014)

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X

X

N/A

3b

4a

Form	1 990-PF (2014) SECOND CORE	FOUNDATION	45-5	<u> 334640 </u>			Page 6
Pz	art VII-B Statements Regard	ling Activities for Which Fe	orm 4720 May Be F	Required (cont	inued)		
5a	During the year did the foundation pay of	or incur any amount to:					
	(1) Carry on propaganda, or otherwise	attempt to influence legislation (se	ection 4945(e))?	\ <u></u>	res 🗓 No		
	(2) Influence the outcome of any specif	ic public election (see section 495	5), or to carry on,				
	directly or indirectly, any voter regis	tration drive?		\ <u></u> \	res 🛚 X No		1
	(3) Provide a grant to an individual for t	ravel, study, or other similar purpo	ses?	X	res No		
	(4) Provide a grant to an organization of	ther than a charitable, etc., organi	zation described in	_			
	section 4945(d)(4)(A)? (see instruct	ions)		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	es X No		
	(5) Provide for any purpose other than	religious, charitable, scientific, liter	rary, or educational	_			
	purposes, or for the prevention of ca	ruelty to children or animals?			es X No		
b	If any answer is "Yes" to 5a(1)-(5), did a	any of the transactions fail to qualif	fy under the exceptions d	lescribed in			
	Regulations section 53 4945 or in a curi					5b	X
	Organizations relying on a current notice	• •	, ,		▶□		
С	If the answer is "Yes" to question 5a(4),						
	because it maintained expenditure resp	·		N/A 🗌	es No		1
	If "Yes," attach the statement required by	• •	d)	• 🗀			
6a			•				
	on a personal benefit contract?	,,,,,	,, , ,		es 🗓 No		
b		premiums, directly or indirectly, or	n a personal benefit conti			6Ь	x
	If "Yes" to 6b, file Form 8870.	promiser, and easy or moneout, or					
7a	At any time during the tax year, was the	foundation a party to a prohibited	tax shelter transaction?		es X No		
	If "Yes," did the foundation receive any				N/A	7b	İ
		fficers, Directors, Trustees					
	and Contractors	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-,		· uiu Lilipioy	,	
1 L	ist all officers, directors, trustees, fou	ndation managers and their con	npensation (see instruc	tions).	, _		
			<u> </u>		(d) Contributions to	I	
	(a) Name and	address	(b) Title, and average hours per week	(c) Compensation (If not paid,	employee benefit		ense account,
	• •		devoted to position	enter -0-)	plans and deferred compensation	other	allowances
MA	RGARET L. MURRAY	FOLSOM	PRESIDENT				
	95 EAST BIDWELL STREET	CA 95630	0.00	o	0		0
	HN M. MURRAY	FOLSOM	CFO CFO				
	95 EAST BIDWELL STREET	CA 95630	0.00	oi	0		•
	IZABETH M. JACKSON	FOLSOM	SECRETARY				0
	95 EAST BIDWELL STREET	CA 95630	0.00		•		•
	73 MIGI DIDHGUL DIREGI	CR 95030	0.00	0	0		0
2	Compensation of five highest-paid en	nnlovees (other than those inclu	Ided on line 1 – see inst	tructions) If non-			
	"NONE."	ipioyees (editer triali triese meta	ided on line 1 – 300 ms	ii detions). Ii nom	s, enter		
				<u> </u>	(d) Contributions to		
	(a) Name and address of each employee	paid more than \$50 000	(b) Title, and average hours per week	(c) Compensation	employee benefit		ense account,
	,,	,	devoted to position	(c) compensation	plans and deferred compensation	other	allowances
NO	NR				Jon ponduon		
			İ				
			<u> </u>				
			_				
					-		
	number of other ampleus as and as a	50.000	<u> </u>				
otal	number of other employees paid over \$5	,U,UUU ,				<u> </u>	0

Form 990-PF (20 <u>1</u>	4) SECOND CORE FOUNDATION	45-5334640		Page 7
	Information About Officers, Directors, Trustees	, Foundation Managers, Highly Paid E	mplo	yees,
	and Contractors (continued)			
3 Five highes	t-paid independent contractors for professional services (see instructions). If none, enter "NONE."		
	(a) Name and address of each person paid more than \$50,000	(b) Type of service		(c) Compensation
NONE		•		
				
Total number of ot	hers receiving over \$50,000 for professional services		┪	
			<u> </u>	
Part IX-A	Summary of Direct Charitable Activities			
	our largest direct charitable activities during the tax year include relevant statistical or beneficiaries served, conferences convened, research papers produced, etc	information such as the number of		Expenses
1 N/A				
2				
		<u></u>		
3				
4				
Part IX-B	Summary of Program-Related Investments (se	ee instructions)		
Describe the two large	st program-related investments made by the foundation during the tax year on lines			Amount
1 N/A				
	<u> </u>			
2				
		ļ		
	led investments. See instructions			
3				

Total. Add lines 1 through 3

Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3ь Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 174,064 4 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 (see instructions) Adjusted qualifying distributions. Subtract line 5 from line 4

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 4940(e) reduction of tax in those years

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173,742

5

6

Form	990-PF (2014) SECOND CORE	FOUNDATION		45-533464	10	Page 9
P	art X間 Undistributed Income	(see instructions)				
1	Distributable amount for 2014 from Part	XI,	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
	line 7					28,090
2	Undistributed income, if any, as of the er	nd of 2014 [.]				
	Enter amount for 2013 only	Ļ				
b	Total for prior years: 20 , 20	, 20				
3	Excess distributions carryover, if any, to	2014 [.]				
а	From 2009				:	
b	From 2010					
C	From 2011					
d	From 2012					
е	From 2013	132,491				
f	Total of lines 3a through e		132,491			
4	Qualifying distributions for 2014 from Pai	t XII,				
	line 4. ▶ \$ 174,064					
	Applied to 2013, but not more than line 2				,,	
b	Applied to undistributed income of prior y	rears ears				
	(Election required – see instructions)	<u> </u>				
С	Treated as distributions out of corpus (El	ection				
	required – see instructions)	-				
	Applied to 2014 distributable amount	-				28,090
	Remaining amount distributed out of corp	<u> </u>	145,974			
5	Excess distributions carryover applied to					
	(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:		ĺ	İ		
•		et line 5	278,465			
	Corpus. Add lines 3f, 4c, and 4e Subtrac Prior years' undistributed income. Subtra	_	2/0,405			
	line 4b from line 2b	Cl				
c	Enter the amount of prior years' undistrib	uted				
·	income for which a notice of deficiency ha			1	[
	been issued, or on which the section 494		!			
	tax has been previously assessed	2(0)				
d	Subtract line 6c from line 6b Taxable	-				
	amount - see instructions					
е	Undistributed income for 2013. Subtract I	ine				
	4a from line 2a. Taxable amount – see					
	instructions					
f	Undistributed income for 2014. Subtract I	ines				
	4d and 5 from line 1. This amount must b	e				
	distributed in 2015					0
7	Amounts treated as distributions out of co	orpus				
	to satisfy requirements imposed by section	on				
	170(b)(1)(F) or 4942(g)(3) (Election may	be				
	required—see instructions)					
8	Excess distributions carryover from 2009	not		1.11		71. 11. H. H. H. H. H. H. H. H. H. H. H. H. H.
	applied on line 5 or line 7 (see instruction	· .				
9	Excess distributions carryover to 2015	i.				
	Subtract lines 7 and 8 from line 6a	L	278,465			
10	Analysis of line 9				· · · · ·	
а	Excess from 2010					
b	Excess from 2011					
C	Excess from 2012					
d	Excess from 2013	132,491				
_е	Excess from 2014	145,974				

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

See Statement 10

See Statement 11

See Statement 12

c Any submission deadlines:

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager Recipient Purpose of grant or status of Amount contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Statement 13 172,421 172,421 Total ▶ 3a **b** Approved for future payment N/A Total **▶** 3b

Part XVI-A	Analysis of Income-Producing Ac	tivities				
	unts unless otherwise indicated.		ed business income	Exclude	d by section 512, 513, or 514	4.
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1 Program ser	vice revenue			-		(oco monacciono)
				 		
				 		
c				 	<u>-</u> -	
		-		 		
				-		·
f	d analysis from any series at a series and			1		
-	d contracts from government agencies			1		
	dues and assessments avings and temporary cash investments			†		
	nd interest from securities	-		14	13,117	
	come or (loss) from real estate	-		1	13/11/	
	anced property			1		
	-financed property			+		
	come or (loss) from personal property			 		
7 Other investi						
	s) from sales of assets other than inventory			14	21,507	
	or (loss) from special events					····
	or (loss) from sales of inventory					
	ue a					
b						•
е						
12 Subtotal Ad	d columns (b), (d), and (e))	34,624	
I3 Total. Add li	ne 12, columns (b), (d), and (e)				13 _	34,624
	in line 13 instructions to verify calculations)				· . · ·	
			ant at Evament D			
Part XVI-B	Relationship of Activities to the A					
Line No. ▼	Relationship of Activities to the A Explain below how each activity for which income accomplishment of the foundation's exempt purp	e is reported in o	column (e) of Part XVI	-A contril	outed importantly to the	
Line No.	Explain below how each activity for which income	e is reported in o	column (e) of Part XVI	-A contril	outed importantly to the	
Line No. ▼	Explain below how each activity for which income	e is reported in o	column (e) of Part XVI	-A contril	outed importantly to the	
Line No. ▼	Explain below how each activity for which income	e is reported in o	column (e) of Part XVI	-A contril	outed importantly to the	
Line No. ▼	Explain below how each activity for which income	e is reported in o	column (e) of Part XVI	-A contril	outed importantly to the	
Line No. ▼	Explain below how each activity for which income	e is reported in o	column (e) of Part XVI	-A contril	outed importantly to the	
Line No. ▼	Explain below how each activity for which income	e is reported in o	column (e) of Part XVI	-A contril	outed importantly to the	
Line No. ▼	Explain below how each activity for which income	e is reported in o	column (e) of Part XVI	-A contril	outed importantly to the	
Line No. ▼	Explain below how each activity for which income	e is reported in o	column (e) of Part XVI	-A contril	outed importantly to the	
Line No. ▼	Explain below how each activity for which income	e is reported in o	column (e) of Part XVI	-A contril	outed importantly to the	
Line No. ▼	Explain below how each activity for which income	e is reported in o	column (e) of Part XVI	-A contril	outed importantly to the	
Line No. ▼	Explain below how each activity for which income	e is reported in o	column (e) of Part XVI	-A contril	outed importantly to the	
Line No. ▼	Explain below how each activity for which income	e is reported in o	column (e) of Part XVI	-A contril	outed importantly to the	
Line No. ▼	Explain below how each activity for which income	e is reported in o	column (e) of Part XVI	-A contril	outed importantly to the	
Line No. ▼	Explain below how each activity for which income	e is reported in o	column (e) of Part XVI	-A contril	outed importantly to the	
Line No. ▼	Explain below how each activity for which income	e is reported in o	column (e) of Part XVI	-A contril	outed importantly to the	
Line No. ▼	Explain below how each activity for which income	e is reported in o	column (e) of Part XVI	-A contril	outed importantly to the	
Line No. ▼	Explain below how each activity for which income	e is reported in o	column (e) of Part XVI	-A contril	outed importantly to the	
Line No. ▼	Explain below how each activity for which income	e is reported in o	column (e) of Part XVI	-A contril	outed importantly to the	
Line No. ▼	Explain below how each activity for which income	e is reported in o	column (e) of Part XVI	-A contril	outed importantly to the	
Line No. ▼	Explain below how each activity for which income	e is reported in o	column (e) of Part XVI	-A contril	outed importantly to the	
Line No. ▼	Explain below how each activity for which income	e is reported in o	column (e) of Part XVI	-A contril	outed importantly to the	
Line No. ▼	Explain below how each activity for which income	e is reported in o	column (e) of Part XVI	-A contril	outed importantly to the	

45-5334640

Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political Transfers from the reporting foundation to a noncharitable exempt organization of X (1) Cash X 1a(2) (2) Other assets b Other transactions. 1b(1) (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) 1b(6) (6) Performance of services or membership or fundraising solicitations c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line no (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations Yes X No described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge May the IRS discuss this return with the preparer sh Sign (see instructions)? Yes Here SECRETARY Print/Type preparer's name Check If setf-employed Paid MICHAEL A. GIOTTO 06/30/15 Preparer CPA CORPORATION P00753944 Firm's name PTIN **Use Only** 20-0579279 1420 ROCKY RIDGE DR STE 130 Firm's EIN ▶ Firm's address

CA

ROSEVILLE,

95661-2834

Form 990-PF (2014)

916-782-8500

Phone no

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

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

SECOND CORE	FOUNDATION	45-5334640
Organization type (check	(one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private	e foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private fou	undation
	501(c)(3) taxable private foundation	
	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	e and a Special Rule See
General Rule		
_	on filing Form 990, 990-EZ, or 990-PF that received, during the year, con y or property) from any one contributor. Complete Parts I and II. See inst contributions	
Special Rules		
regulations under 13, 16a, or 16b, a	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 3 sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form and that received from any one contributor, during the year, total contribut of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line	n 990 or 990-EZ), Part II, line itions of the greater of (1)
contributor, during	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ they the year, total contributions of more than \$1,000 exclusively for religious ional purposes, or for the prevention of cruelty to children or animals. Co	ıs, charıtable, scientific,
contributor, during contributions total during the year fo General Rule ap	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ they the year, contributions exclusively for religious, charitable, etc., purpose led more than \$1,000. If this box is checked, enter here the total contribuing an exclusively religious, charitable, etc., purpose. Do not complete any plies to this organization because it received nonexclusively religious, charitable, etc., purpose are more during the year.	es, but no such utions that were received v of the parts unless the
990-EZ, or 990-PF), but it	that is not covered by the General Rule and/or the Special Rules does not must answer "No" on Part IV, line 2, of its Form 990, or check the box of 2, to certify that it does not meet the filing requirements of Schedule B (F	on line H of its Form 990-EZ or on its

Page 1 of 1

age 2

Name of organization
SECOND CORE FOUNDATION

Employer identification number 45-5334640

Part I	Contributors (see instructions). Use duplicate copies of	Part I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JOHN M. MURRAY 2795 EAST BIDWELL STREET SUITE 100-231 FOLSOM CA 95630	\$ 252,295	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 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 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.)

Page 1 of 1

age 3

Name of organization
SECOND CORE FOUNDATION

Employer identification number 45-5334640

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

(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	PUBLICLY TRADED SECURITIES		
		\$ 252,295	12/26/14
(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
It		\$	
(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
		\$	

Form 990-PF		Capital Gains and Losse	es for Tax on Inv	estment Ind	come	2014
	For calend	dar year 2014, or tax year beginning		, and ending		atification Number
lame .					Employer ide	ntification Number
SECOND COR	E FOUNI	DATION			45-5334	640
(a)	List and describ 2-story brick wa	e the kind(s) of property sold, e.g., real estate, rehouse, or common stock, 200 shs. MLC Co		(b) How acquired P-Purchase D-Donation	(C) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1) BOND FUN	DS			P	Various	Various
2) EQUITY F				P	Various	Various
BOND FUN				P	Various	Various
4) EQUITY F	_	TATE OF		P	Various	Various
5) OTHER MU		ISTRIBUTIONS		P	Various	Various
6) CAPITAL (7)	GAIN D.	ISTRIBUTIONS	· · · · · · · · · · · · · · · · · · ·			
B)						
9)						
10)						
11)						
12)					<u>-</u> .	
13)					 -	ļ
1 <u>4)</u> 15)		<u> </u>			 	
(e) Gross sales pri	rce	(f) Depreciation allowed (or allowable)	(g) Cost or othe plus expense of	r basis f sale	(h) Gair (e) plus (f	or (loss)) minus (g)
	011			9,713		-702
	762			5,983		3,779
	669			2,378		-709
	653			5,549		12,104
	092 220			1,277		2,815 4,220
6) 4, 7)	220					4,220
8)						
9)						
10)						
11)						,
12)						
13)						
14) 15)						
		ng gain in column (h) and owned by the			(I) Gains (Co	l (h) gain minus
(i) FMV as of 12/31	1/69	(j) Adjusted basis as of 12/31/69	(k) Excess of over col (j),	rcol (I) If any	col (k), but not le Losses (from	ol (h) gain minus ss than -0-) Or n col (h))
1)						-702
2)					ļ	3,779
3)					<u> </u>	<u>-709</u>
4) 5)		-			<u> </u>	12,104 2,815
5) 6)				•		4,220
<u>97. </u>						_,
8)						
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19205 SECOND CORE FOUNDATION 45-5334640 FYE: 12/31/2014	Federal Statements	6/30/2015 10:57 AM
State	Statement 1 - Form 990-PF, Part I, Line 16a - Legal Fees	
Description LEGAL FEES	Total Investment \$	Charitable Purpose
Total	\$ 891 \$ 0 \$	\$ 0
Statement 2	nt 2 - Form 990-PF, Part I, Line 16b - Accounting Fees	Sees
Description ACCOUNTING FEES	Investment \$ \$	Adjusted Charitable Net \$
וסרמו	CTO (#	
Statement 3	Statement 3 - Form 990-PF, Part I, Line 16c - Other Professional Fees	al Fees
Description	Net A Total Investment	Adjusted Charitable Net Purpose
Investment fees Total	\$ 2,385 \$ 2,385 \$ \$ 2,385 \$ 2,385 \$	w w
<u>St</u>	Statement 4 - Form 990-PF, Part I, Line 18 - Taxes	
Description	Net A Total Investment	Adjusted Charitable Net Purpose
FEDERAL TAX STATE TAX	\$ 147 \$ \$ 10	w
Total	\$ 157 \$ 0 \$	\$ 0
		1-4

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Federal Statements

19205 SECOND CORE FOUNDATION 45-5334640 FYE: 12/31/2014

	Charitable Purpose	252 1,094 297		Date		Fair Market Value \$ 435,993
Sesued	Adjusted Net	w w	ions, Gifts, Grants	Book Value Explanation	ck Investments	Basis of Valuation
Form 990-PF, Part I, Line 23 - Other Expenses	Net Investment	w w	5 - Noncash Contribut	Book Value Amount	e 10b - Corporate Sto	End of Year \$ 440,218
	Total	\$ 252 1,094 297 \$ 1,643	Statement 6 - Form 990-PF, Part I, Line 25 - Noncash Contributions, Gifts, Grants	FMV Explanation	Statement 7 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments	Beginning of Year \$ 167,694
Statement 5 -	Description	Expenses POSTAGE AND MAILING SERVICES OFFICE EXPENSE OTHER OPERATING EXPENSE Total	Statement 6 - Form	Noncash Amount Description	Statement 7 - Fo	Description SCHWAB EQUITY FUNDS Total

	ă	eginning		End of	Beginning End of Basis of	ш.	Fair Market
Description		of Year		Year	Valuation		Value
	δ	151,062	ঞ	190,397	Cost	₩	183,013
	₹\$	151,062	₩	190,397		ጭ	183,013

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SECOND CORE FOUNDATION 34640 12/31/2014	
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Federal Statements

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		שטירר, רמונ וו,		Jerr, raith, thie 13 - Other myestine	Allici II		
Description	B	Beginning of Year		End of Year	Basis of Valuation	LL,	air Market Value
OTHER MUTUAL FUNDS	\$	30,150	\$	69,481	Cost	৵	82,528
Total	·v»	30,150	S.	69,481		ۍ ا	82,528

.19205 SECOND CORE FOUNDATION 45-5334640 **Fe**

FYE: 12/31/2014

JOHN M. MURRAY

Total

Federal Statements

Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

 Name of Manager
 Amount

 \$ 252,295

 \$ 252,295

Statement 10 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

SCHOLARSHIP APPLICATIONS MAY BE OBTAINED BY VISITING THE FOUNDATIONS WEBSITE AT WWW.SECONDCOREFOUNDATION.WORDPRESS.COM OR BY EMAILING SECONDCOREFOUNDATION@GMAIL.COM. APPLICANTS MAY REAPPLY NO MORE THAN ONCE A YEAR AND WILL BE REQUIRED TO PROVIDE EVIDENCE OF SATISFACTORY COMPLETION. INFORMATION AND MATERIALS SUBMITTED WITH THE APPLICATION MUST DEMONSTRATE THAT THE APPLICANT MEETS THE FOLLOWING ELIGIBILITY REQUIREMENTS: THE STUDENT IS ACTIVELY INVOLVED IN EXTRACURRICULAR ACTIVITIES AND/OR VOLUNTEER EFFORTS, CAN SHOW EVIDENCE OF FINANCIAL NEED, CAN SHOW PROOF OF ENROLLMENT OR A COMPLETED SUBMITTED APPLICATION TO AN ACCREDITED COLLEGE OR UNIVERSITY AND HAS MAINTAINED AN OVERALL GPA OF 3.0 OR BETTER. TWO LETTERS OF RECOMMENDATION MUST ALSO BE SUBMITTED WITH THE APPLICATION. IN ADDITION, APPLICANTS MUST ATTACH A BRIEF SUMMARY ABOUT THEMSELVES INCLUDING SPECIAL ACHIEVEMENTS, PERSONAL VISION AND GOALS AND A DESCRIPTION OF THEIR PLANS REGARDING HOW THEY WILL USE THE SCHOLARSHIP.

Statement 11 - Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

APPLICATIONS ARE DUE BY JANUARY 31ST OF EACH YEAR FOR SCHOLARSHIP AWARDS TO BE MADE IN THAT YEAR. LATE APPLICATIONS ARE NOT ACCEPTED.

Statement 12 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

SCHOLARSHIP GRANTS ARE FOR COLLEGE AND POST HIGH SCHOOL EDUCATION AND CAN BE USED FOR TUITION, BOOKS AND OTHER LIVING EXPENSES WHILE THE STUDENT IS ENROLLED.

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Statement	

Year

	Amount		52,321	5.000		23,000		2,000	٦.		1,500	•	3,000	•	5,000		5,000	•	3,000		1,000		5,000		3,000		3,000		5,000		2,500	
	4																															
	Purpose																															
			SCHOLARSHIP	SCHOLARSHIP		SCHOLARSHIP		SCHOLARSHIP	SCHOLARSHIP		SCHOLARSHIP		SCHOLARSHIP		SCHOLARSHIP		SCHOLARSHIP		SCHOLARSHIP		SCHOLARSHIP		SCHOLARSHIP		SCHOLARSHIP		SCHOLARSHIP		SCHOLARSHIP		SCHOLARSHIP	
Address	Status	TREET, #302	1/A ====================================	IRCLE I/A	E CIRCLE	I/A	E DRIVE	1/A ====================================	I/A	OLD CT.	I/A	URT	I/A	WAY	I/A	COURT	I/A	IRCLE	I/A	CIRCLE	I/A	WAY	I/A	ΑY	I/A	WAY	I/A	WAY	I/A	FRANCIS CIR.	4/P	1
Ado	Relationship	709 CENTRE S	NONE N/A	NONE LOS NELLER C	503 ESPLANAD	NONE	8845 CARRIAG	NONE	NON CERE	7950 WHITE G	NONE	104 CLAIM CO	NONE	118 FANTAGES	NONE	935 MARKHAM	NONE	1029 BROCK C	NONE	935 STERLING	NONE	110 RHOADES	NONE	113 KERWIN W	NONE	115 BARROWS	NONE	3179 ALRIDGE	NONE	5533 W. ST.	NONE TOE SANDS WAY	
Name	Address		JAMAICA PLAIN MA 02130	95630		95630		BAY CA 95746	Y CA 95746		CA 95483		95630		95630		EL DORADO HILLS CA 95762		95630		95630		95630		95630	٧.			LLS CA 95762	3.4	95650	() () ()
	A	CHRISTINE SMIT	JAMAICA PL	. ₹	z	Ą		GRANITE BA	GRANITE BAY	SARAH NALYANAYA	ANTELOPE C	JENNA BARRERA	FOLSOM CA	HANNAH CHU	FOLSOM CA	MARYN HAYWARD	EL DORADO	JESSICA HAMZAWI	4	SARAH ZUMWALT	FOLSOM CA	ANN EDLUND	Ą	ERICA LAUTRUP	FOLSOM CA	BRIDGET HANZALIK	FOLSOM CA 95630	HAOMIN LUO	EL DORADO		LOOMIS CA	

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Helationship Status 216 PERSIFER STREET N/A P.O. BOX 4550 N/A S57 E. 2ND AVENUE N/A 327 MONTROSE DRIVE N/A 6483 MAIN AVENUE N/A PUB. CHARITY FAMILY HEALTH PUB. CHARITY FOOD BANK SERV S483 MAIN AVENUE N/A PUB. CHARITY FOOD BANK SERV	Melationship Status Purpose Amongo Amongo Status Status Purpose Amongo Status St	Name		Address	ı	•
216 PERSIFE N/A 257 E. 2ND N/A 327 MONTROSI N/A 6483 MAIN AN	216 PERSIFER STREET N/A P.O. BOX 4550 N/A 257 E. 2ND AVENUE N/A 327 MONTROSE DRIVE N/A 6483 MAIN AVENUE N/A 6483 MAIN AVENUE N/A PUB. CHARITY FOOD BANK SERVICES 117	Address	Relationship	Status	Purpose	Amount
N/A P.O. BOX 45: N/A 257 E. 2ND 3 N/A 327 MONTROS! N/A 6483 MAIN A	N/A P.O. BOX 4550 N/A P.O. BOX 4550 N/A PUB. CHARITY MINISTRY SERVICES S27 E. 2ND AVENUE N/A PUB. CHARITY FAMILY HEALTH SERVICES N/A PUB. CHARITY FOOD BANK SERVICES N/A PUB. CHARITY FOOD BANK SERVICES N/A PUB. CHARITY FOOD BANK SERVICES N/A PUB. CHARITY FOOD BANK SERVICES		216 PERSIFE	R STREET		
P.O. BOX 45: N/A 257 E. 2ND 3 N/A 327 MONTROS: N/A 6483 MAIN A3 N/A	P.O. BOX 4550 N/A 257 E. 2ND AVENUE N/A 327 MONTROSE DRIVE N/A 6483 MAIN AVENUE N/A PUB. CHARITY FAMILY HEALTH SERVICES 1 1 1 1 1 1 1 1 1 1 1 1 1	A 95630	N/A	PUB. CHARITY	FOR SCHOLARSHIPS	10,000
N/A 257 E. 2ND 3 N/A 327 MONTROSI N/A 6483 MAIN AY	N/A 257 E. 2ND AVENUE N/A 327 MONTROSE DRIVE N/A 6483 MAIN AVENUE N/A PUB. CHARITY FOOD BANK SERVICES N/A PUB. CHARITY FOOD BANK SERVICES N/A 17	NCE INTERNATIONAL	P.O. BOX 45	550		
257 E. 2ND N/A 327 MONTROSIN/A 6483 MAIN AN/A	257 E. 2ND AVENUE N/A 327 MONTROSE DRIVE N/A 6483 MAIN AVENUE N/A PUB. CHARITY FOOD BANK SERVICES N/A PUB. CHARITY FOOD BANK SERVICES	E CA 92052	N/A	PUB. CHARITY I	MINISTRY SERVICES	5,200
025 N/A 327 MONTROS: N/A 6483 MAIN A' 15662 N/A	N/A PUB. CHARITY FAMILY HEALTH SERVICES 327 MONTROSE DRIVE N/A PUB. CHARITY FOOD BANK SERVICES 6483 MAIN AVENUE 15662 N/A PUB. CHARITY FOOD BANK SERVICES	OMEN'S CENTER		AVENUE		•
327 MONTROS; N/A 6483 MAIN A ³ 15662 N/A	327 MONTROSE DRIVE N/A PUB. CHARITY FOOD BANK SERVICES 6483 MAIN AVENUE 5662 N/A PUB. CHARITY FOOD BANK SERVICES	O CA 92025	N/A	PUB. CHARITY	FAMILY HEALTH SERVICES	12,400
N/A 6483 MAIN A1 15662 N/A	N/A PUB. CHARITY FOOD BANK SERVICES 6483 MAIN AVENUE 5662 N/A PUB. CHARITY FOOD BANK SERVICES	OD BANK	327 MONTROS	E DRIVE		
6483 MAIN AN 6662 N/A	6483 MAIN AVENUE 5662 N/A PUB. CHARITY FOOD BANK SERVICES	A 95630	N/A	PUB. CHARITY	FOOD BANK SERVICES	10,000
N/A	N/A PUB. CHARITY FOOD BANK SERVICES	D BANK	6483 MAIN A	VENUE		
	172,42	LE CA 95662	N/A	PUB. CHARITY	FOOD BANK SERVICES	5,000
						172,421