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Form **990-PF**

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.

OMB No 1545-0052

In	ternal	Revenue Service	▶ Int	formation ab	out Forr	n 990	-PF	and its separa				v/form990pf. O	en to Public In	
F		lendar year 2014	or ta	x year begi	nning			01	8/01 ,2014	, and end			07/31,	2015
		of foundation									·	A Employer identifi		
_		SHARKS FOUN									77-037406			
	Numb	er and street (or P O	box nur	mber if mail is n	ot delivere	d to str	eet a	ddress)		Room/su	ite	B Telephone number (see instructions)		
					_							(40	8) 999-57	784
525 WEST SANTA CLARA STREET														
City or town, state or province, country, and ZIP or foreign po					istal co	de				l.	C. If avamption applies	tion is		
	CRN	700F G7 0F	110	1500								C If exemption applica pending, check here		
_		JOSE, CA 95	113-			Т		1-1-1-1	- f - f					. \square
G	Che	eck all that apply	-	Initial retu		}			of a former p	oublic cha	irity	D 1 Foreign organizat		. ▶∟
			-	Final retur		-		Amended re				2 Foreign organizat 85% test, check h		
_	Cho	ck type of organi	f organization X Section 50			'c)(3)		Name chang				computation .		. ▶ 📖
ſ		eck type of organi. Section 4947(a)(1) r						ner taxable pr		tion	[]	E If private foundation		
1		market value o						ethod X C		rual		under section 507(b)		
•		of year (from Pai						ecify)	asii [] Acc	Juai		F If the foundation is under section 507(b)		1 1
				544.				must be on ca	sh basis)			211201 00011011 001 (0)	(1)(2), 2.12211121	
E		Analysis of Rev				ĺ			T				(d) Disburse	ements
_	ait	total of amounts in	colum	ns (b), (c), an	nd (d)		•	evenue and enses per	(b) Net inve		(c) Adjusted net	for charit	
	may not necessarily equal the amounts in column (a) (see instructions))			s in			books	income			income	purpose cash basis)		
_	1	Contributions gifts, grant			hedule)			740,853						
	2	Check If the	e founda	ation is not req	uired to									
	3	Interest on savings ar		B				906	•	906.			ATCH 1	-
	4	Dividends and inte												
	5a	Gross rents												
	ь	Net rental income or (loss)						<u></u>		<u> </u>			
æ	6a	let gain or (loss) from sale of assets not on line 10					<u></u>							
evenue	b	Gross sales price for a assets on line 6a	<u></u>			ļ			-					
	7	Capital gain net in	come (from Part IV,	line 2) .									
ĸ	8	Net short-term cap	ıtal gaı	n										
	9	Income modification									ļ			
	10 a	and allowances									<u> </u>		· · · · · ·	
	1	Less Cost of goods so	_											
	l .	Gross profit or (loss					1	,057,798.				1,057,798.		
	11 12	Other income (atta						,799,557.		906.	<u> </u>	1,057,798.		
_							_=	,					7	
S	13	Other employee sa						186,808.			RI	-CERA ERIS	70	
us u	15	Pension plans, em		-				25,766.		$\neg \uparrow$	<u> </u>	25,766.	700	
ge	16 a	Legal fees (attach s	-							200	11	UN 1 3 2016	1001	
ú	b	Accounting fees (a								ļ ₀	31		二旦	
ĕ	Į.	Other professional									<u>ا</u>	ODEN U		
rat	17	Interest			•									
ist	18	Taxes (attach sche	dule) (s	see instruction	ns)[3].			17,231.				17,231.		
듣	19	Depreciation (attac	h sche	edule) and de	pletion.						ļ <u>-</u> _			
ğ	20	Occupancy												
ġ	21	Travel, conferences	s, and r	meetings							<u> </u>			
a	21 22	Printing and public						540 176	ļ <u>-</u>			548,176.		
gu	23 24	Other expenses (at						548,176.			<u> </u>	340,170.		
rat	24	Total operating an						777,981.				777,981.		
be		Add lines 13 through	-				1	,275,601.				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1.2	75,601
0	25	Contributions, gifts						,053,582.				777,981.		75,601
_	26	Total expenses and disb			4 and 25			, 000, 002.				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	±, 2	
į	27	Subtract line 26 fro			onte			-254,025.						
		Net investment inc	-					201,020.		906.				
		Adjusted net incor	-	•								279,817.		

JSA For Paperwork Reduction Act Notice, see instructions. $^{4\text{E}1410\ 1\ 000}$ TS2837 517K

Part	Balance Sheets description column should be for end-of-year	Beginning of year	End of ye	ear
للنات	amounts only (See instructions)	(a) Book Value		(c) Fair Market Value
1	Cash - non-interest-bearing	1,602,792.	1,373,544.	1,373,544
2	Savings and temporary cash investments			
3	Accounts receivable ▶			
	Less allowance for doubtful accounts ▶	_		
4	Pledges receivable ▶			<u> </u>
1	Less allowance for doubtful accounts ▶			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons (attach schedule) (see instructions)			
7	Other notes and loans receivable (attach schedule)			
1	Less allowance for doubtful accounts ▶			
2 8	Inventories for sale or use			
8 9 0	Prepaid expenses and deferred charges	34,191.		
102	Investments - U.S. and state government obligations (attach schedule)			
	Investments - corporate stock (attach schedule)		· · · · · · · · · · · · · · · · · · ·	
	Investments - corporate stock (attach schedule)			
11	Investments - corporate bonds (attach scriedule) Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule)			
12 13 14	Investments - mortgage loans Investments - other (attach schedule) Land, buildings, and equipment basis Less accumulated depreciation (attach schedule)			
1	(attach schedule)			
15	Other assets (describe			
16	Total assets (to be completed by all filers - see the instructions Also, see page 1, item I)	1,636,983.	1,373,544.	1,373,544
+		131,624.	1,373,544.	1,5/5/544
17	Accounts payable and accrued expenses	131,024.	122,210.	
18	Grants payable			
19	Deferred revenue			
19 20 21	Loans from officers, directors, trustees, and other disqualified persons			
7 I	Mortgages and other notes payable (attach schedule)			
22	Other liabilities (describe			
		131 604	100 010	
23	Total liabilities (add lines 17 through 22)	131,624.	122,210.	
24 24	Foundations that follow SFAS 117, check here. and complete lines 24 through 26 and lines 30 and 31.			
24	Unrestricted			
25	Temporarily restricted			
26	Permanently restricted			
24 25 26 27 28 29	Foundations that do not follow SFAS 117, ► X 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	1 505 250	1 251 224	
29	Retained earnings, accumulated income, endowment, or other funds	1,505,359. 1,505,359.	1,251,334.	
30	Total net assets or fund balances (see instructions)	1,303,359.	1,251,334.	
31	Total liabilities and net assets/fund balances (see	1 626 002	1 272 544	
	instructions)	1,636,983.	1,373,544.	
	Analysis of Changes in Net Assets or Fund Balan			
	al net assets or fund balances at beginning of year - Part II		1 1	1 505 350
	l-of-year figure reported on prior year's return)			1,505,359
2 Ent	er amount from Part I, line 27a		2	-254,025
3 Oth	er increases not included in line 2 (itemize) ▶		3	1 051 331
i Add	I lines 1, 2, and 3		4	1,251,334
, Dec	creases not included in line 2 (itemize) ▶		5	1 051 304
3 Tot	al net assets or fund balances at end of year (line 4 minus l	ine 5) - Part II, column (b),	line 30 6	1,251,334

Capital Gains and Losses for Tax on Investment Income

Part IV

	(a) List and 2-story b	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
1a				S S S S S S S S S S S S S S S S S S S		
b						
c						
d						
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu	
a				<u> </u>		
b				ļ		
<u>c</u>				ļ <u>.</u>		
d						
e				ļ		
	Complete only for assets	showing gain in column (h) and owner			Gains (Col (h) ga	
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col.	(k), but not less t Losses (from co	
<u>a</u>						
b						
C						
<u>d</u>	· · · · · · · · · · · · · · · · · · ·			 		
е			gain, also enter in Part I, line 7	 		
2 3	Net short-term capital ga If gain, also enter in Pa Part I, line 8	In or (loss) as defined in sections 1 Int I, line 8, column (c) (see inst	ructions) If (loss), enter -0- in	3 3		
Na		the section 4942 tax on the distrib	utable amount of any year in the b	ase period	J2	Yes X No
		not qualify under section 4940(e)		a any ant		
1	Enter the appropriate am	· · · · · · · · · · · · · · · · · · ·	r, see the instructions before makin	g any enti	ries.	
Ca	Base period years alendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution ra (col (b) divided by	
	2013	774,803.	1,438,703.			0.538543
	2012	495,630.	1,382,783.			0.358429
	2011	341,501.	1,240,181.			0.275364
	2010	336,744.	1,016,699.			0.331213
	2009	347,121.	1,036,122.			0.335019
				i i		
2	Total of line 1, column (d))	<i></i> .	2		1.838568
3		for the 5-year base period - divide				
	number of years the foun	dation has been in existence if less	s than 5 years	3		0.367714
4	Enter the net value of nor	ncharitable-use assets for 2014 fro	om Part X, line 5	4	1,	548,881.
5	Multiply line 4 by line 3.			5		569,545.
6				6		9.
7				7		569,554.
		ons from Part XII, line 4		8		275,601.
8			n Part VI, line 1b, and complete t			

	•						
Form	990-PF (2014) THE SHARKS FOUNDATION 77-03			age 4			
Pa	tVI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ction	s)			
1a	Exempt operating foundations described in section 4940(d)(2), check here						
	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						
	here \blacktriangleright X and enter 1% of Part I, line 27b						
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of $\mathcal I$						
	Part I, line 12, col (b)						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2						
3	Add lines 1 and 2						
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)						
5	Tax based on investment medice. Subtract line 4 from line 3. If 2010 or less, circle 0						
6	Credits/Payments 2014 estimated tax payments and 2013 overpayment credited to 2014 5, 967.						
а	20 7 Salimatos tar paymont director of organisms of cartos to 20 7 7 1 1 1						
b	Exempt foreign organizations - tax withheld at source.						
C	Tax paid with application for extension of time to the (Form 6000)						
d 7	Backup withholding erroneously withheld		5.9	967			
7 8	Enter any penalty for underpayment of estimated tax. Check here		<u>_</u>				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed						
10	The state of the state of this of the state						
11	5 OC7 mg 11114						
Pai	t 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		X			
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			į			
	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 > \$						
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on						
	foundation managers \$			٠			
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			v			
	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					
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b 5		Х			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	-					
	If "Yes," attach the statement required by General Instruction T	1 1					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
	By language in the governing instrument, or By language in the governing instrument, or By language in the governing instrument as that no mandatory directions that						
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Х				
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	Х				
va	CA,						
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General						
~	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Х				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	1					
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"	}	ļ				

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

77-0374062

11 At any 'time during the year, did the foundation, directly or indirectly, own a controlled entity within the	•		ŀ
meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	1	X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
Website address N/A		·	
14 The books are in care of ► KEN CAVENEY Telephone no ► 408-999	-578	34~-	
14 The books are in care of ► KEN CAVENEY Localed at ►525 WEST SANTA CLARA ST SAN JOSE, CA ZiP+4 ► 95113-1 15 Section 4947(a)(1) proposempt chargible trusts filling Form 990-PE in lieu of Form 1041 - Check here	520		
15 Section 4947(a)(1) nonexempt charitable trusts filling Form 990-PF in lieu of Form 1041 - Check here		▶	.TT
and enter the amount of tax-exempt interest received or accrued during the year			
16 At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority		Yes	No
over a bank, securities, or other financial account in a foreign country?	16		X
See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1) If			
"Yes," enter the name of the foreign country >	ļ	İ	
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required	L		
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a During the year did the foundation (either directly or indirectly).			'''
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			j
(1) Engage in the sale of exchange, or leasing of property with a disqualmed person.			İ
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			ĺ
disqualifica person?		ľ	
(o) I divisit goods, services, or identices to (or decept them from) a disqualified persons.		ĺ	Į
(1) by compensation to, or pay or rembared the expenses of a disquaries person.		į	
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
		Ì	
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
foundation agreed to make a grant to or to employ the official for a period after]	
termination of government service, if terminating within 90 days)		1	
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		j	Х
section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
Organizations relying on a current notice regarding disaster assistance check here			l
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		l	
were not corrected before the first day of the tax year beginning in 2014?	1c		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		1	I
operating foundation defined in section 4942(j)(3) or 4942(j)(5))		1	ı
a At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and	1	- 1	ı
6e, Part XIII) for tax year(s) beginning before 2014? Yes X No	. }	}	
If "Yes," list the years		ł	
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		İ	
(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	[- 1	
all years listed, answer "No" and attach statement - see instructions) , , , , , , , , , , , , ,	_2b		
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	1	- 1	
•	j	-	
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	- }		
at any time during the year? Yes X No		}	
b If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or		- {	
disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the]	1	
Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of	}	1	
the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	ļ	}	
foundation had excess business holdings in 2014)	3b		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	}	}	
charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b	DE	<u> </u>

Form 9	990-PF (2014) THE SHARKS FO	UNDATION		77-	0374062	Page 6
Pai	t VII-B Statements Regarding Activities	for Which Form	4720 May Be Red	uired (continued)		
5a				· · · · · · · · · · · · · · · · · · ·		
	(1) Carry on propaganda, or otherwise attempt to influ	ence legislation (secti	on 4945(e))?	. Yes X No	5	
	(2) Influence the outcome of any specific public el	ection (see section	4955), or to carry o	n,		
	directly or indirectly, any voter registration drive?			Yes X No	。	
	(3) Provide a grant to an individual for travel, study, or	other similar purposes	,	Yes X No	o	
	(4) Provide a grant to an organization other than a					
	section 4945(d)(4)(A)? (see instructions)				,	
	(5) Provide for any purpose other than religious, c			• — —		
	purposes, or for the prevention of cruelty to children				,	
b	If any answer is "Yes" to 5a(1)-(5), did any of the					
	Regulations section 53 4945 or in a current notice regal					
	Organizations relying on a current notice regarding disa					
С	If the answer is "Yes" to question 5a(4), does the					
•	because it maintained expenditure responsibility for the				,	İ
	If "Yes," attach the statement required by Regulations se	-				İ
6a	Did the foundation, during the year, receive any ful	, ,	eath, to make manners			
va	on a personal benefit contract?					
b	Did the foundation, during the year, pay premiums, dire				6ь	x
b	If "Yes" to 6b, file Form 8870	ectly of monectly, on a	personal benefit contra	ictr	80	
7a	At any time during the tax year, was the foundation a p	arty to a prohibited to	u abaltar transaction?	Vos X No		
	If "Yes," did the foundation receive any proceeds or ha				1 [
	t VIII Information About Officers, Directo					
	and Contractors		_			
1	List all officers, directors, trustees, foundation r	nanagers and thei (b) Title, and average	r compensation (see	(d) Contributions to		
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expense ad other allows	
ATCI	5		0	q		0
					-	
2	Compensation of five highest-paid employees 'NONE."	(other than thos	e included on line	e 1 - see instruction	ons). If none	e, enter
(2)	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit	(e) Expense ac	ccount.
(a)	value and address of each employee paid more than \$50,000	devoted to position	(c) Compensation	plans and deferred compensation	other allowa	inces
						
ATCH			186,808.	25,767.		0
	·····		, , , , , , , , , , , , , , , , , , ,			
			ļ			
		-				
otal	number of other employees paid over \$50,000.					
viai i	THE THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF T					

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Form 990-PF (2014) Page 7 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors (continued) Five highest-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 others receiving over \$50,000 for professional services . Part IX-A **Summary of Direct Charitable Activities** List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc 1 N/A Summary of Program-Related Investments (see instructions) Amount Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 N/A All other program-related investments. See instructions 3 NONE

Form 990-PF(2014)

Total. Add lines 1 through 3.

Page 8

Par	Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	eign founda	tions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc	,	
	purposes		
а	Average monthly fair market value of securities		<u>-</u>
b	Average of monthly cash balances	. 1b	1,572,468.
С	/, , , , , , , , , , , , , , , , , , ,	1c	
d	Total (add lines 1a, b, and c)	. 1d	1,572,468.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	_	
2	Acquisition indebtedness applicable to line 1 assets	. 2	
3	Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see	3	1,572,468.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see	Э	
	instructions)	. 4	23,587.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,548,881.
6	Minimum investment return. Enter 5% of line 5	. 6	77,444.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating fo and certain foreign organizations check here ▶ and do not complete this part)	undations	-
1	Minimum investment return from Part X, line 6	. 1	77,444.
2 a	Tax on investment income for 2014 from Part VI, line 5		
b			
c			
3	Distributable amount before adjustments Subtract line 2c from line 1		77,444.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4		77,444.
6	Deduction from distributable amount (see instructions).	•	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII	•	
•	line 1		77,444.
		• • •	
Part	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а		. 1a	1,275,601.
b			
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		3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line		1,275,601.
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)		9.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		1,275,592.
-	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when		
	qualifies for the section 4940(e) reduction of tax in those years.	Jaioaiating V	

Form 990-PF (2014)

Page 9 Part XIII Undistributed Income (see instructions) (a) (b) (c) (d) 2013 Corpus Years prior to 2013 2014 Distributable amount for 2014 from Part XI, 77,444. Undistributed income, if any, as of the end of 2014 a Enter amount for 2013 only . . . b Total for pnor years 20 12 ,20 11 ,20 10 Excess distributions carryover, if any, to 2014 475,350 a From 2009 336,744. b From 2010 279,492. c From 2011 426,491. d From 2012 702,875. From 2013 2,220,952. Total of lines 3a through e Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ 1,275,601. a Applied to 2013, but not more than line 2a . . . **b** Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) 77,444. d Applied to 2014 distributable amount 1,198,157 e Remaining amount distributed out of corpus . . Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: 3,419,109. a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b Taxable amount - see instructions Undistributed income for 2013 Subtract line Undistributed income for 2014 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) Excess distributions carryover from 2009 not 475,350 applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2015. 2,943,759 Subtract lines 7 and 8 from line 6a Analysis of line 9 336,744. Excess from 2010 . . . 279,492. b Excess from 2011 . . . 426,491. Excess from 2012 . . . 702,875. d Excess from 2013 . . . 1,198,157. Excess from 2014 . . .

ANNUALLY, APPROXIMATELY SEPTEMBER 30 OF EACH YEAR

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

ATCH 8

Form 990-PF (2014)

Page 11

Part XV Supplementary Information (continued)			
3 Grants and Contributions Paid Durin Recipient Name and address (home or business)	ng the Year or Appr	oved for l	Future Payment	
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)	or substantial contributor	recipient	contribution	
a Paid during the year				
ATCH 9		ì		
AICH 9			İ	
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			3	
				Į Į
				1 275 601
	<u> </u>		▶ 3a	1,275,601.
b Approved for future payment				
				<u> </u>
		,		
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			,	
Total			▶ 3b	
Total	· · · · · · · · · · · · · · · · · · ·			

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rt XVI-A · Analysis of Income-Proder gross amounts unless otherwise indicated		ated business income	Excluded by	section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exem function income
1			1		(See instructions
					- · · · · · · · · · · · · · · · · · · ·
Fees and contracts from government agencies	ļ				
lembership dues and assessments			14	906.	
iterest on savings and temporary cash investments ividends and interest from securities	-		13	500.	
let rental income or (loss) from real estate.					
Debt-financed property					
Not debt-financed property					
et rental income or (loss) from personal property					
other investment income					
ain or (loss) from sales of assets other than inventor	1 -				
et income or (loss) from special events	·		01	560,517.	
ross profit or (loss) from sales of inventory					
ther revenue a					
				5.61.400	
	culations)				561,4
ubtotal Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call tXVI-B Relationship of Activities No. Explain below how each activity	culations) s to the Ac	complishment of Ex	cempt Purp	oses) of Part XVI-A contribu	
ubtotal Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call tXVI-B Relationship of Activities No. Explain below how each activity	culations) s to the Ac	complishment of Ex	cempt Purp	oses) of Part XVI-A contribu	ted importantly t
ubtotal Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call tXVI-B Relationship of Activities No. Explain below how each activity	culations) s to the Ac	complishment of Ex	cempt Purp	oses) of Part XVI-A contribu	ted importantly t
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ubtotal Add columns (b), (d), and (e)	culations) s to the Ac	complishment of Ex	cempt Purp	oses) of Part XVI-A contribu	ted importantly t
ubtotal Add columns (b), (d), and (e)	culations) s to the Ac	complishment of Ex	cempt Purp	oses) of Part XVI-A contribu	ted importantly t
ubtotal Add columns (b), (d), and (e)	culations) s to the Ac	complishment of Ex	cempt Purp	oses) of Part XVI-A contribu	ted importantly t
ubtotal Add columns (b), (d), and (e)	culations) s to the Ac	complishment of Ex	cempt Purp	oses) of Part XVI-A contribu	ted importantly t
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ubtotal Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call tXVI-B Relationship of Activities No. Explain below how each activity	culations) s to the Ac	complishment of Ex	cempt Purp	oses) of Part XVI-A contribu	ted importantly to
ubtotal Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call tXVI-B Relationship of Activities No. Explain below how each activity	culations) s to the Ac	complishment of Ex	cempt Purp	oses) of Part XVI-A contribu	ted importantly t
Subtotal Add columns (b), (d), and (e)	culations) s to the Ac	complishment of Ex	cempt Purp	oses) of Part XVI-A contribu	ted importantly t

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Form 99	0-PF (2014)	THE S	HARKS FOUNDATION		77-037	4062	Pag	ge 13
Part	XVII		n Regarding rganizations	Transfers To and Transa	ctions and Rela	tionships With Non	chari	table	;
н	n sec	-	-	ctly engage in any of the follown nan section 501(c)(3) organizat	•			Yes	No
a 7	ransf	fers from the rep		n to a noncharitable exempt org					v
(2) Ot	her assets					1a(1) 1a(2)		X
		transactions les of assets to	a noncharitable	exempt organization			1b(1)		Х
(2) Pu	rchases of asse	ts from a nonch	arıtable exempt organization			1b(2)		X
(·	3) Re 4) Re	ental of facilities, elmbursement ar	equipment, or o rangements	ther assets			1b(3) 1b(4)		X
(:	5) Lo	ans or loan guara	antees				1b(5)		X
() c S	6) Pe Sharin	rformance of sei	rvices or membi	ership or fundraising solicitations g lists, other assets, or paid emp			1b(6)		X
q It	the alue	answer to any of the goods, ot	of the above is her assets, or s	"Yes," complete the following services given by the reporting	schedule Column foundation If the fo	(b) should always show oundation received less	v the f than f	aır m	arket
(a) Line		(b) Amount involve		rangement, show in column (d		transfers, transactions, and sha			
		N/A			N/A				
						-			
	-								
				· · · · · · · · · · · · · · · · · · ·					
			•	affiliated with, or related to, or elated to			Ye	s X] No
<u>b</u> If	"Yes	" complete the i		(b) Type of organization		(c) Description of relations		_	
		(a) Name of organi		N/A		(c) Bescription of relations			
									
				examined this return, including accompanying han taxpayer) is based on all information of whi			e and be	elief, it i	is true,
Sign	•	Vicin	m	62.2016	Treasur	May the IRS	discuss		
Here	Sign	nature of officer or tru	stee	Date	Title	(see instruction:	s)? X	Yes	No
 Paid	<u> </u>	Print/Type prepare		Preparer's signature	Date		TIN		
Prepa	rer	DAVID R KEN	YON CTC MYCFO,	LLC LLC		self-employed 1	0125 52269		<u> </u>
Use C			2200 GENG	ROAD, SUITE 100				_	
			PALO ALTO,	CA	94303	Phone no 650 23	LO-50 m 990		2014)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Schedule of Contributors

OMB No 1545-0047

Name of the organization

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. Department of the Treasury Internal Revenue Service

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.

Employer identification number

THE SHARKS FOUNDAY	FION	77-0374062
Organization type (check of	one)	1-222.10
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a	private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a priva	ate foundation
	501(c)(3) taxable private foundation	
· · ·	is covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Ri	ule and a Special Rule See
General Rule		
	ion filing Form 990, 990-EZ, or 990-PF that received, during the yea by or property) from any one contributor. Complete Parts I and II. Se all contributions	
Special Rules		
regulations under 13, 16a, or 16b, a	on described in section 501(c)(3) filing Form 990 or 990-EZ that me r sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (li and that received from any one contributor, during the year, total coins of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ	Form 990 or 990-EZ), Part II, line intributions of the greater of (1)
contributor, durin	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 or 990 o	eligious, charitable, scientific,
contributor, durin contributions tota during the year fo General Rule app	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990 g the year, contributions <i>exclusively</i> for religious, charitable, etc., pulled more than \$1,000. If this box is checked, enter here the total color an <i>exclusively</i> religious, charitable, etc., purpose. Do not complete blies to this organization because it received <i>nonexclusively</i> religious, it more during the year.	orposes, but no such contributions that were received any of the parts unless the charitable, etc., contributions
990-EZ, or 990-PF), but it m	nat is not covered by the General Rule and/or the Special Rules does nust answer "No" on Part IV, line 2, of its Form 990, or check the bo , to certify that it does not meet the filing requirements of Schedule B	ox on line H of its Form 990-EZ or on its

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) (2014)

Employer identification number 77-0374062

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

		,	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	COMERICA BANK 333 W. SANTA CLARA STREET SAN JOSE, CA 95113	\$20,000.	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
2_	SAP 3410 HILLVIEW AVENUE PALO ALTO, CA 94304	\$383,900.	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
3 _	RELIABLE CONCEPTS 954 CHESTNUT STREET SAN JOSE, CA 95110-1504	\$5,000.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4 _	S&M MOVING 48551 WARM SPRINGS ROAD FREMONT, CA 94539	\$5,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	LEBOULANGER 305 N. MATHILDA AVENUE	\$ 5,000.	Person X Payroli
	SUNNYVALE, CA 94085	\$5,000.	(Complete Part II for noncash contributions)
(a) No.	SUNNYVALE CA 94085	(c) Total contributions	(Complete Part II for

Employer identification number 77-0374062

Part I Contribu	t <mark>ors</mark> (see instructions).	Use duplicate copies of Par	rt I if additional space is needed.
-----------------	----------------------------------------	-----------------------------	-------------------------------------

(a)	(b)	(c)	(d) Type of contribution
No.	Name, address, and ZIP + 4	Total contributions	
7_	KAISER 19000 HOMESTEAD ROAD CUPERTINO, CA 95014	\$37,400.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
8 _	KORET FOUNDATION 611 FRONT STREET SAN FRANCISCO, CA 94111	\$100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
9 - 1	TAUBE PHILANTHROPIES 1050 RALSTON AVENUE BELMONT, CA 94002	\$100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
_ 10 _	KP FINANCIAL SERVICES 75 N. FAIR OAKS AVENUE PASADENA, CA 91103	\$35,000.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
_ 11 _	THE BENEVITY COMMUNITY IMPACT FUND 1522 GEORGETOWN ROAD HUDSON, OH 44236	\$11,516.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
_ 12_	WENDER WEIS FOUNDATION FOR CHILDREN 655 BRYANT STREET, SUITE 300 PALO ALTO, CA 94301	\$5,000.	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer Identification number 77-0374062

Part I	art 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	
_ 13 _	VARIOUS CONTRIB. LESS THAN \$5,000 EACH	\$18,037.	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 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)	

Employer identification number 77-0374062

			77-0374062
Part II	Noncash Property (see instructions) Use duplicate copies of Pa	art II if additional space is ned	eded
(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 Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Page 4 Name of organization THE SHARKS FOUNDATION Employer identification number 77-0374062 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once See instructions) ▶\$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee