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# Form **990-PF**

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

Department of the Treasury 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.

FOI	cale	ndar year 2015 or tax year	Deginning			, and ending		
Na	ıme o	f foundation					A Employer identification	number
	нЕ	FAT TIRE FO	UNDATIO	N			20-8066058	J
Νι	mber	and street (or P O box number if	B Telephone number	<u> </u>				
	50	PASO DEL ARR	OYO				(650) 529-	0345
Cı	y or t	town, state or province, cou	ntry, and ZIP or	foreign p	oostal code		C If exemption application is p	ending, check here
	POR	TOLA VALLEY,	CA 94	028				•
G	Checl	k all that apply:	Initial return		Initial return of a f	ormer public charity	D 1. Foreign organization:	s, check here
			Final return		X Amended return			
			Address change	:	Name change		2 Foreign organizations me check here and attach co	eeting the 85% test, omputation
Н	Checi	k type of organization:	X Section 50	I(c)(3) e	xempt private foundation		E If private foundation sta	tus was terminated
	] S∈	ection 4947(a)(1) nonexemp	pt charitable trus	it 🔲	Other taxable private found	ation	under section 507(b)(1	
I F	air m	arket value of all assets at e	nd of year J	Account	ing method: X Cash	Accrual	F If the foundation is in a	
(1	rom	Part II, col (c), line 16)		o	ther (specify)		under section 507(b)(1)	
	<b>\$</b> _	18,652	,628. (Pa	rt I, colu	ımn (d) must be on cash	basis )		, , , , , , , , , , , , , , , , , , ,
Р	art l		d Expenses	-	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		necessarily equal the amount	s in column (a) )	nay not	expenses per books	` income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants	s, etc., received		28.			
	2	Check X if the foundation	is not required to attach	Sch B				
	3	Interest on savings and tempor cash investments	rary					
	4	Dividends and interest from	m securities		156,221.	156,221.	156,221.	Statement 1
	5a	Gross rents					J	
	b	Net rental income or (loss)						
ď	6a	Net gain or (loss) from sale of a	ssets not on line 10	)	292,336.			
Ď	b	Gross sales price for all assets on line 6a	3,650,4	<u>56.</u>				-
Revenue	7	Capital gain net income (from F	Part IV, line 2)			292,336.		
œ	8	Net short-term capital gair	1				N/A	
9	9	Income modifications						•
2016	10a	Gross sales less returns and allowances						
က	b	Less Cost of goods solo	CEIVED					
0	C	Gross profit or (loss)	The same of the sa	78				
>	11	Other income	T & 7 2016	13				
<u>№</u>	12	Total. Add lines 1 through	1418 7	18	448,585.	448,557.	156,221.	
	13	Compensation of difficers, direct		1-1-4	0.	0.	0.	0.
Ш	14	Other employee salaries a	1 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	977.67 W				
NNED	15	Pension plans, employee t	penefits"					
<b>A</b>	16a	Legal fees						
SCA Expens	.  Þ	Accounting fees	<b>G L L</b>	2	21 006	01 006		
O) E	_ C	Other professional fees	Stmt	4	21,006.	21,006.	0.	0.
Ž	17	Interest	Gbb	2	4 000	4 000		
stra	18	Taxes	Stmt	3	4,962.	4,962.	0.	0.
. <u>=</u>	19	Depreciation and depletion	l					
p	20	Occupancy	anatinan					
þ	21	Travel, conferences, and n	needings					
ā	22	Printing and publications	Stmt	1	23,330.	22 220	0	
ţi	23	Other expenses		4	43,330.	23,330.	0.	0.
Operating and Administrative	24	Total operating and admi			49,298.	49,298.	0.	0.
ô	25	Contributions, gifts, grants	expenses. Add lines 13 through 23		499,008.	43,430.	0.	499,008.
	26	Total expenses and disbu			200,000.			433,000.
	20	Add lines 24 and 25	nocmento		548,306.	49,298.	0.	499,008.
	27	Subtract line 26 from line	12		340,300.	<u> </u>	0.	±23,000·
		Excess of revenue over expens		nte	-99,721.			
	1	Net investment income (if			1,1210	399,259.		
	1	Adjusted net income (if ne				000,200,	156,221.	

Fo	rm 99	0-PF (2015) THE FAT TIRE FOUNDATION		20-	8066058 Page 2
Balance Sheets Attached schedules and amounts in the description			Beginning of year	End of	f year
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts ▶			
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges		-	
Ä	1	Investments - U.S. and state government obligations			
	i	Investments - corporate stock			
	1	Investments - corporate bonds			
	1	Investments - land, buildings, and equipment basis			
	' '	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis			
	'	Less accumulated depreciation			
	15	Other assets (describe >			
	1	Total assets (to be completed by all filers - see the		·	<del></del>
	''	instructions. Also, see page 1, item 1)	19,416,675.	18,652,628.	18,652,628.
_	17	Accounts payable and accrued expenses	13/110/0/30	10,7032,7020.	10/000/000
	18	Grants payable			1
۰,	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ē	21	Mortgages and other notes payable			
Ë	1	Other liabilities (describe )			
		Other habilities (describe			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_	20	Foundations that follow SFAS 117, check here		<u>`</u>	
		and complete lines 24 through 26 and lines 30 and 31			
es	24	Unrestricted			
anc	25	Temporarily restricted			
3alë	1	Permanently restricted			
<b>Fund Balances</b>	20	Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds	0.	0.	
Net Assets or	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
λss	29	Retained earnings, accumulated income, endowment, or other funds	19,416,675.	18,652,628.	
et/	l	Total net assets or fund balances	19,416,675.	18,652,628.	
Z	30	Total net assets of fund balances	17,410,075.	10,032,020.	
	21	Total liabilities and net assets/fund balances	19,416,675.	18,652,628.	
_			•	10,032,0201	
F	<u>'art</u>	III Analysis of Changes in Net Assets or Fund B	alances		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30		
•		st agree with end-of-year figure reported on prior year's return)	1	19,416,675.	
2	•	r amount from Part I, line 27a		2	-99,721.
3		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	19,316,954.
		eases not included in line 2 (itemize)   CHANGE IN ASSE	T VALUE	5	664,326.
		18,652,628.			
_		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co		6	Form <b>990-PF</b> (2015)

3,993. Enter 1% of net investment income (1% of Part I, line 27b) 6 629,265. 7 Add lines 5 and 6 7

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

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499,008.

8 Enter qualifying distributions from Part XII, line 4

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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 here and enter 1%	1		7,	985.
	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).	*		•	
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			0.
	Add lines 1 and 2	3		7,	985.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0.
	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5		7,	985.
	Credits/Payments:			; ^	*
	2015 estimated tax payments and 2014 overpayment credited to 2015 6a	- ×	>	3	* ***
	Exempt foreign organizations - tax withheld at source 6b	<b>~</b>			*
C	Tax paid with application for extension of time to file (Form 8868)  6c			,	
	Backup withholding erroneously withheld 6d		. ;	\$ \$ ·	•
	Total credits and payments. Add lines 6a through 6d	7	·		0.
	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	8			190.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	- 9			175.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	- 10			
	Enter the amount of line 10 to be: Credited to 2016 estimated tax	- 11			
	rt 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 interve	ne in		Ye	s No
	any political campaign?			la	Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definit	on)?		1 <b>b</b>	Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials public	shed or			
	distributed by the foundation in connection with the activities			1	
C	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. ▶ \$	<u>.</u>		* * *	× ×
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			, , ,	
	managers. ▶ \$0 .				·
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	ı, 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?			la	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	\$b	
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			-	
	ullet By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the s	ate 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	ΧV		7 X	
				ŀ	4
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				5
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			3b 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 continuous conti	alendar			
-	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV			9	X_
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10	X
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Part VII-B, Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (sectio	n 4945(e))?	Ye	s X No	l	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire				-
any voter registration drive?			s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	9	Y•	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
4945(d)(4)(A)? (see instructions)		Ye	s X No	1	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	, or educational purposes, or t				
the prevention of cruelty to children or animals?			s X No		
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify un	der the exceptions described	ın Regulatıons			
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b	
Organizations relying on a current notice regarding disaster assistance check t					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f					
expenditure responsibility for the grant?		I/A	s L No	ľ	
If "Yes," attach the statement required by Regulations section 53 494	, ,				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	<i>-</i>	[TEE]		
a personal benefit contract?		Ye	s X No		,,
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870			GET		
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	s X No	74	
b If "Yes," did the foundation receive any proceeds or have any net income attrib		manara Highli	N/A	7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, roundation wa	inagers, nigni	,		
List all officers, directors, trustees, foundation managers and their	compensation.				
List all officers, an octors, a actors, feathers, managers and are	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plan	. (6	Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plan and deferred compensation	acc	count, other llowances
JEFF JORDAN	DIRECTOR	enter-o-j	Compensation	<del> </del>	iiowanees
50 PASO DEL ARROYO	DIRECTOR			İ	
PORTOLA VALLEY, CA 94028	0.00	0.	0		0.
KAREN SHISHINO JORDAN	DIRECTOR			•	<u>.</u>
50 PASO DEL ARROYO	DINDCION				
PORTOLA VALLEY, CA 94028	0.00	0.	0		0.
OKIODA VADDDI, CAI 94020	- 0.00				
	-				
	-				
				1	
	-				
	1				
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1). If none,	enter "NONE."			
4.) Name and address of each ampleyes and more than \$50,000	(b) Title, and average	(-) Componentian	(d) Contributions to employee benefit plan	ς (ε	e) Expense count, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	l acc	llowances
NONE					
	]			1	
	<u></u>	<u> </u>			
Total number of other employees paid over \$50,000			<b></b>		0

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Part-VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
	<del></del>
Total number of others receiving over \$50,000 for professional services	▶ 0
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	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	-
1 <u>N/A</u>	
2	
2	
3	
4	
Part IX-B Summary of Program-Related Investments	<u> </u>
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	_
Total. Add lines 1 through 3	▶ 0.
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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	19,518,323.
b	Average of monthly cash balances	1b	
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	19,518,323.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	19,518,323.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	292,775.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	19,225,548.
6	Minimum investment return Enter 5% of line 5	6	961,277
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
<u> </u>	Minimum investment return from Part X, line 6	1	961,277
і 2а	Tax on investment income for 2015 from Part VI, line 5	<b>'</b>	301,211
2a b	Income tax for 2015. (This does not include the tax from Part VI.)	1	
C	Add lines 2a and 2b	1 20	7,985.
3	Distributable amount before adjustments. Subtract line 2c from line 1	2c 3	953,292
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	953,292
6	Deduction from distributable amount (see instructions)	6	933,292.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	953,292
P	Qualifying Distributions (see instructions)	<u> </u>	333,232
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	499,008.
þ	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:		
a	Suitability test (prior IRS approval required)	3a	<del>.</del>
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	499,008
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	499,008.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies fo	r the section

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4940(e) reduction of tax in those years.

### Part XIII Undistributed Income (see instructions)

a Excess from 2011 b Excess from 2012		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
2. Unashabuted recents, of any, as of the world of 2015 a. Entior amount of 2014 only b. Total for prior years: 2012. 2007. 3. Excess distributions curyover, if any, to 2015; a From 2010 b. From 2011 c. From 2013 c. From 2014 1 Total of lines 3s through e 4. Qualifying distributions to 2015 from Part XII, line 4; b. \$ 499,008, a Applied to 2014, but not more than line 2a b. Applied to 2014, but not more than line 2a b. Applied to 2014, but not more than line 2a b. Applied to 2015 distributions or of corpus (Election requiredsee instructions) c. I resteld as distributions or of corpus (Election requiredsee instructions) d. Applied to 2015 distributions and or corpus 5. Excess administration or express expenses to 20. 5. Excess administration or express expenses to 20. 5. Excess administration or express expenses to 20. 6. Enter the act total of a each column as indicate below. 6. Caption Asia the see 3. c., and 4s Substact line 4. 6. Enter the amount of prory years' undestributed income for 2015. Subtract line 4 for him 2b. Tabable amount - see mist. 6. Lindes the amount of prory years' undestributed income for 2015. Subtract line 4 for him 2b. Tabable amount - see mist. 6. Lindes the amount of prory years' undestributed income for 2015. Subtract line 4 for him 2b. Tabable amount - see mist. 6. Lindestributed income for 2014. Subtract line 4 for him 2b. Tabable amount - see mist. 7. Amounts treated as distributions out of corpus to stately requirements imposed by section 170(b) (1)(6) or 442(c)(6) (Clection may be required see missed to 30 or 40 o	·				
a Enter amount for 2014 only  Total for proy years:  2012 . 2007 .  10 , 763 .	line 7				953,292.
10, 763. 2012 2007. 3 Excess distributions carryover, if any, to 2015: a From 2016 b From 2016 d From 2013 e From 2014 1 Total of lines 3a through e  4 Qualifying distributions for 2015 from Part XII, line 4: ▶ \$ 499, 008. a Applied to 2015, but not more than line 2a Applied to indistributed income of prior years (Election regulared -see instructions) e Treated as distributions out of corpus (Election regulared -see instructions) d Applied to 2015 distributable amount e Remaining amount distributed out of corpus (Election regulared -see instructions) e Treated as distributions carryover applied in the see in	-			400 000	
2012 2007. 10,763.	,			488,903.	
3 Excess dishibutions carryover, if any, to 2015; a From 2016 from 2013 e From 2014 from 2013 e From 2014 from 2013 e From 2016 from 2016 from 2016 from 2016 from 2017 from 2016	· · · · · · · · · · · · · · · · · · ·		40 500		
a From 2010 b From 2012 d From 2013 e From 2014 1 Total of lines 3a through e  O.  Qualifying distributions for 2015 from Part XII, line 4 ► S  499,008  A Applied to 2014, but not more than line 2a  Applied to Indistributed income of prior years (Election required - see instructions)  C Treated as distributions out of corpus (Election required - see instructions)  Applied to 2015 distributions are of corpus (Election required - see instructions)  Applied to 2015 distributions are of corpus (Election required - see instructions)  Applied to 2015 distributions are of corpus (Election required - see instructions)  Applied to 2015 distributions are of corpus (Election required - see instructions)  Applied to 2015 distributions are of corpus (Election required - see instructions)  C Applied to 2015 distributions are of corpus (Election required - see instructions)  C Applied to 2015 distributions are of corpus (Election required - see instructions)  C Better the net total of each column as indicate deletion.  C Corpus Additioned as through the corpus are of the			10,763.		
b From 2012 c From 2013 e From 2014 1 Total of lines 3a through e  4 Qualifying distributions for 2015 from Part XII, line 4: Ps. 3 499, 008 3 Applied to 2014, but not more than line 2a 4 Applied to 2014, but not more than line 2a 4 Applied to Indistributed income of princy years ((Election required - see instructions) c Treated as distributions out of corpus ((Election required - see instructions) c Treated as distributions around applied amount e Remaining amount distributed out of corpus E-Becase distributions careyover applied to 2016 ((final amount appears in columnica)) 6 Enter the net total of each column as indicated below. 1 Corpus Adal Innes 32. 4s, and 4s Subtract line 9 Throny years 'unistributed incomes (but which a notice of the season service) 1 D, 763. c Enter the amount of princy years' unistribution from line 2b c Enter the amount of princy years' unistribution from line 2b c Enter the amount of princy years' unistribution from line 3b this section 494(2a) tax has been previously assessed d Subtract line 6e from line 6b. Taxable amount - see instructions 1 Undistributed income for 2015. Subtract line 4 at from line 2a. Taxable amount - see instructions 1 Undistributed income for 2014. Subtract line 4 at from line 2a. Taxable amount - see instructions 1 Undistributed income for 2015. Subtract line 4 at from line 2a. Taxable amount - see instructions 2 Total and the subtraction of the season and	ı				,
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d Excess from 2014	d Excess from 2014				
e Excess from 2015	e Excess from 2015				

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Form **990-PF** (2015)

	TIRE FOUND				166058 Page 10
Part,XIV Private Operating F	<b>oundations</b> (see in	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling of		, ,			
foundation, and the ruling is effective for	•	•	▶ └		
<b>b</b> Check box to indicate whether the foun		ng foundation described i		4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	4110044	Prior 3 years	(1) 0040	
income from Part I or the minimum	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					5
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly			•		
for active conduct of exempt activities.					
Subtract line 2d from line 2c  Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
<ol> <li>Total support other than gross investment income (interest, dividends, rents, payments on</li> </ol>					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or me	ore in assets
at any time during				•	
1 Information Regarding Foundation	on Managers:	-			
a List any managers of the foundation wh year (but only if they have contributed r			ributions received by the	foundation before the clo	se of any tax
None					<del></del> -
b List any managers of the foundation whether entity) of which the foundation has			or an equally large portion	n of the ownership of a p	artnership or
None			<u> </u>		
2 Information Regarding Contribut Check here  (1) If the foundation of	only makes contributions (	to preselected charitable (	organizations and does n	ot accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indiv	riduals or organizations u	nder other conditions, co	mplete items 2a, b, c, and	l d.
a The name, address, and telephone num	ber or e-mail address of t	he person to whom appli	cations should be addres	sed:	
<b>b</b> The form in which applications should i	pe submitted and informat	tion and materials they sh	ould include		
c Any submission deadlines:		-			
d Any restrictions or limitations on award	e cuch as by apparantion	al areae, charitable fields	kinds of institutions, or a	ther factors	
u miy icanichuna or iiinikahuna on awalo	o, outil as by yetylapillea	ar ar cas, criarnavie neius,	หมานอ บา มารถเนนเบทร, UF 0	unoi iautufs,	

Supplementary information	·····		<del></del>	<del></del>
3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
_				
Razoo	NONE		GENERAL	1 000
			-	1,000.
Internews Networks	NONE		GENERAL	
				900.
				<del></del>
	:			
Junipero Serra High School	NONE		GENERAL	
				1,500.
			L	
Kindred Journey Fund Inc.	NONE		GENERAL	700
				788.
KIVA	NONE		GENERAL	
				600.
Total See COI	<u>ntinuation shee</u>	t(s)	► 3a	499 008.
b Approved for future payment				
None				
Total			<b>▶</b> 3b	0.

Part XVI-A Analysis of Income-Producing Activities
--

Enter aros	s amounts unless otherwise indicated.	Unrelate	ed business income		uded by section 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income
	n service revenue:	Code		Code		
_	<del></del>					
				<u> </u>		
_				<b></b>		<del> </del>
ť —	-					
g Fee:	s and contracts from government agencies		-	·		
2 Membe	rship dues and assessments					
3 Interest	on savings and temporary cash					
ınvestn	nents					
4 Dividen	ds and interest from securities					156,221.
5 Net ren	tal income or (loss) from real estate:		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, <u>.</u>	
	t-financed property					
	debt-financed property					
6 Net ren	tal income or (loss) from personal					
propert				ļ		<u> </u>
	exestment income					· · · · · · · · · · · · · · · · · · ·
	(loss) from sales of assets other					
than in						292,336.
	ome or (loss) from special events			ļ <u>.</u>		<u> </u>
	profit or (loss) from sales of inventory			ļ		<del>                                     </del>
11 Other r						
						<del></del>
			-			
e		·	<del>-</del>			
	ıl. Add columns (b), (d), and (e)		0.		0.	448,557.
	Add line 12, columns (b), (d), and (e)			•	13	
	sheet in line 13 instructions to verify calculations.)					
Part X	VI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	t Purposes	
	Explain below how each activity for which incom				· · · · · · · · · · · · · · · · · · ·	
Line No.  ▼	the foundation's exempt purposes (other than b			COILLI	outed importainly to the acco	inpushment of
	INVESTMENT INCOME	, p				<del></del>
<u>4</u> 8	INVESTMENT PROCEEDS					
<del>-</del>						,, <del></del>
		_				
		., _				
		<del></del>				
						<del></del>
	<u>.</u>					
						<del></del>
			<u> </u>			
<del></del>		<del></del>				
	1					
				<del></del>		

Form 990-PF		AT TIRE F				20-806		Pa	ige <b>13</b>
Part XVII			sfers To a	and Transactions	and Relations	hips With Noncha	ritable	•	
	Exempt Organ								
				g with any other organizati		on 501(c) of		Yes	No
				7, relating to political orgai	nizations?				
	s from the reporting found	iation to a noncharital	ble exempt or	ganization of:					
(1) Cas							1a(1)		X
	er assets •						1a(2)		X
	insactions;								
, ,	es of assets to a noncharita						1b(1)		X
	chases of assets from a no	•	organization				1b(2)		X
	ital of facilities, equipment,						1b(3)		X
• •	mbursement arrangements	;					1b(4)		X
	ns or loan guarantees						1b(5)		X
	formance of services or me						1b(6)		X
_	of facilities, equipment, ma	-			waya ahayy tha fair a	norkat value of the goods	1c		
				dule. Column <b>(b)</b> should al ed less than fair market vali				:15,	
	(d) the value of the goods,			eu 1655 tilali iali illalket vali	ue in any transaction	or snaming arrangement, s	MOW III		
(a) Line no	(b) Amount involved			exempt organization	(d) Description	of transfers, transactions, and	channa arr		
(a) Eine ne	(b) / mileant mileared	(c) name or	N/A	oxompt organization	(a) Description	or amisicis, amisaccions, and	STEERING EATE	a igente	1113
-			14/11						
		<u> </u>							
			··						
		<del></del>							
		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·				<del>.</del>	
		T		·-··					
						·····			
						*** * ******			
2a Is the for	undation directly or indirec	tly affiliated with, or r	elated to, one	or more tax-exempt organ	izations described	_			_
ın sectio	n 501(c) of the Code (othe	r than section 501(c)	(3)) or in sect	ion 527?			Yes	X	No
b If "Yes,"	complete the following sch								
	(a) Name of org	janization		(b) Type of organization	1	(c) Description of relations	hip		
	N/A								
	,								
						<del></del>			
Unde	or populting of parting I dealers	that I have averaged the	a ratura inalisata	a second particle and	I statements and to the	hoot of my knowledge		_	
and t				g accompanying schedules and taxpayar) is based on all inform		May any knowledge May	y the IRS di urn with the	scuss f	:his er
Sign Here	f (). $0$	AA		10/21/16	DIDEGE	sho	wn below (	see ins	tr )?
<b>  </b>	gnature of officer or trustee	a IPC		Date	DIRECT Title	OR U	Yes		J No
- 31(	Print/Type preparer's na		Preparer's si		Date	Check If PTIN			
	Triniv Type preparer 3 in	aine	i reparer s si	gnature	1	self- employed			
Paid	John S. Mu	ırrav		TIML	10/20/16		08303	3 6 0	
Preparer	Firm's name ► GW		J.C	11"1)		Firm's EIN ► 26-1			
Use Only	Tirring mainter City	a naue, D	<u> </u>	/		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	TOTO(	<i>y</i> <b>U</b>	
	Firm's address ▶ 93	Worcesta	r St	//	<del></del>	<del> </del>			
		ellesley,		81-3609		Phone no. (781)	239-	-11	88
	<u>, , , , , , , , , , , , , , , , , , , </u>			1 1 O I /	<u></u>		<del></del>		

Phone no. (781) 239-1188
Form **990-PF** (2015)

THE FAT TIRE FOUNDATION

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y			<del></del>	
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		
KQED Member Services	NONE		GENERAL	1,650
Social and Environmental Entrepreneurs	NONE		GENERAL	1,125
LGEF The Los Gatos Education Foundation	NONE		GENERAL	3,600
LGHS New Millennium Foundation	NONE		GENERAL	1,800
Make-A-Wish Greater Bay Area	NONE		GENERAL	2,100
MPAEF	NONE		GENERAL	975
Episcopal Community Services (ECS)	NONE		GENERAL	558
The diaTribe Foundation	NONE		GENERAL	10,000
				10,000
Delta Queen	NONE		GENERAL	1,000
Juvenile Diabetes Research Foundation	NONE		GENERAL	
	TOTAL TOTAL		DELEIVED	25,000
Total from continuation sheets		<del> </del>		494,220

Part XV Supplementary Informat			•	
3 Grants and Contributions Paid During th			<del></del>	
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		
Diaper Driver	NONE		GENERAL	50.
Humane Society Silicon Valley	NONE		GENERAL	5,000.
Human Rights Watch	NONE		GENERAL	10,000.
Carb DM	NONE		GENERAL	4,444.
Bellamine College Prep.	NONE		GENERAL	1,000.
KQED Member Services	NONE	<u>.</u>	GENERAL	1,500.
Crohs & Colitis	NONE		GENERAL	100.
National MS Society	NONE		GENERAL	200.
Stanford University - Men's Basketball	NONE		GENERAL	20,000.
Razoo Foundation	NONE		GENERAL	268.
Total from continuation sheets		<del></del>		

20-8066058

Part XV Supplementary Informatio				00000
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
Sharsheret Athlete	NONE		GENERAL	500.
JDRF	NONE		GENERAL	
				1,000.
, TDDB	NONE		CENTEDAY	
JDRF 	NONE		GENERAL	1,000.
·				
JDRF	NONE		GENERAL	1,000.
Stanford University Gifts	NONE		GENERAL	,
		· · · · · · · · · · · · · · · · · · ·		250.
Stanford University - Annual Giving	NONE		GENERAL	
				50,000.
Portola Valley Schools Foundation	NONE		GENERAL	1,000.
Carb DM	NONE		GENERAL	5,000.
Acterra	NONE		GENERAL	
				1,000.
Stand4Lyme Foundation	NONE		GENERAL	
Total from continuation sheets				250.
		<del></del>	· // / / / / / / / / / / / / / / / / /	

THE FAT TIRE FOUNDATION

Part XV Supplementary Informatio 3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to			
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
· · · · · · · · · · · · · · · · · · ·	or substantial contributor	recipient		
JCSF	NONE		GENERAL	150,000
(NICA) National Interscholastic	NONE		GENERAL	
Cycling Association				250
Upward Roots	NONE		GENERAL	1,000
Lick-Wilmerding High School	NONE		GENERAL	75,000
World Wildlife Fund	NONE		GENERAL	2,500
Art in Action	NONE		GENERAL	100
JDRF	NONE		GENERAL	50,000
Greater Good Science Center	NONE		GENERAL	5,000
Boys and Girls Club of the Peninsula	NONE		GENERAL	2,500
Humane Society Silicon Valley (MD)	NONE		GENERAL	1,000

Part XV Supplementary Information				
3 Grants and Contributions Paid During the				
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	
Humane Society Silicon valley (AJ)	NONE		GENERAL	
				1,000.
Tananan Nasainan Gibirana Tanana	VONE			
Japanses American Citizens League	NONE		GENERAL	500.
BAWSI	NONE		GENERAL	
				1,000.
Professional Profession		1		
Pandemonium Aviaries	NONE		GENERAL	500.
Project Healthy Children	NONE		GENERAL	
				1,000.
<b>3</b> - <b>1</b> -				
Acterra	NONE		GENERAL	1,000.
Ecumenical Hunger Program	NONE		GENERAL	
				5,000.
ALS-TDI	NONE		OFFICE AT	
AUS-101	NONE		GENERAL	5,000.
NAMI	NONE		GENERAL	
				5,000.
Stanford Associates	NONE		CENEDAL	
Stantolu Associates	NONE		GENERAL	500.
Total from continuation sheets				

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
The diaTribe Foundation	NONE		GENERAL	5,000
Second Harvest Food Bank	NONE		GENERAL	20,000
GLIDE	NONE		GENERAL	
				5,000
The Philanthropy Workshop	NONE		GENERAL	5,000
		- 1		
				<del></del>

THE FAT TIRE FOU	NDATION	20-80	66058	Page 1	of 1
Part IV   Capital Gains and Los	sses for Tax on Investment Income		•		
• (a) List and 2-story br	d describe the kind(s) of property solorick warehouse; or common stock, 20	d, e.g., real estate, 00 shs. MLC Co.	(b) How acquir P - Purchase	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a NFS 088510 REP			P	Various	12/31/15
b NFS 088510 REP			P	Various	12/31/15
c NFS 088510 NOT			P	Various	12/31/15
d NFS 000374 REP			P		12/31/15
e NFS 000374 REP			P	Various	12/31/15
f Capital Gains			<del></del>	Various	12/31/13
9		· · · - · · ·			
h		<del></del>			<b></b>
					<del> </del>
<u> </u>					
m					
n					
0					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (loss) ) plus (f) minus (g)	
a 293,672.		378,407.			-84,735.
b 1,570,082.		1,837,620.			267,538.
c 449,657.		513,878.			<u>-64,221.</u>
d 690,883.		582,948.			<u>107,935.</u>
e 60,705.		45,267.			15,438.
f 585,457.					<u>585,457.</u>
<u>g</u>					
h					·
k					
1					
m					
n					
0					
Complete only for assets showin	ng gain in column (h) and owned by t		(I) L	osses (from col. (h)). s of col. (h) gain ove	r col (k)
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (ı) over col. (ֈ), ıf any	bu	t not less than "-0-")	
a			**		<del>-84,735.</del>
b					267,538.
<u>C</u>	<u> </u>		**		$\frac{-64,221}{107,935}$
d e					15,438.
f		-			585,457.
9					
h					
<u> </u>	<u> </u>		·- ·- ··		
<u></u>	<u> </u>			<del></del>	
k				<del></del>	
m		-··	<del></del>		
n					
0					
		_			
2 Capital gain net income or (net ca	- 11 (1000); cirtor 0	, I	2		292,336.
<ol> <li>Net short-term capital gain or (los If gain, also enter in Part I, line 8,</li> </ol>	ss) as defined in sections 1222(5) and column (c)	d (6):			

523591

\*\* (Short-term)

If (loss), enter "-0-" in Part I, line 8

23,200.

#### 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

2015

Name of the organization Employer identification number THE FAT TIRE FOUNDATION 20-8066058 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II 🔟 For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file 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) (2015)

but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

Employer identification number

#### THE FAT TIRE FOUNDATION

20-8066058

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	JEFF JORDAN  50 PASO DEL ARROYO  PORTOLA VALLEY, CA 94028	 \$	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	KAREN JORDAN  50 PASO DEL ARROYO  PORTOLA VALLEY, CA 94028	 \$	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
· ·-		s	Person Payroll Onncash (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
		\$Schedule R /Form	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

#### THE FAT TIRE FOUNDATION

20-8066058

Part II	<b>Noncash Property</b>	(see instructions). Use duplicate copies of Part II if additional space is	needed.
---------	-------------------------	--	---------

(a) No. from Part I  (a) No. from Part I	(b)  Description of noncash property given  (b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)  \$ (c) FMV (or estimate) (see instructions)	(d) Date received  (d) Date received
No. from		(c) FMV (or estimate)	
No. rom		FMV (or estimate)	
		\$	
(a) No. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		  \$	

Employer identification number

HE FA' Part III	the year from any one contributor. Complete of	columns (a) through (e) and the follo	20-8066058 It in section 501(c)(7), (8), or (10) that total more than \$1 lowing line entry. For organizations	,000 fo	
	completing Part III, enter the total of exclusively religiou Use duplicate copies of Part III if addition	s, charitable, etc., contributions of \$1,000 o al space is needed	r less for the year (Enterthis into once)		
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	d	
-	Transferee's name, address, a	(e) Transfer of git	ft  Relationship of transferor to transferee		
-	Transferee 3 fiame, address, at	10211 7 7	Treationship of transfer of to transferee	-	
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	d	
-		(e) Transfer of git	ft		
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	d	
-		(e) Transfer of git	ft		
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee		
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	d	
	(e) Transfer of gift				
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee		
] -					

Form 990-PF	Dividend ———	s and Inter	est from Secu	rities St	tatement 1
Source	Gross Amount	Capital Gains Dividend	Revenue	(b) Net Invest- ment Income	(c) Adjusted Net Income
NFS 088510	741,678	. 585,45	7. 156,221	. 156,221.	156,221.
To Part I, line 4	741,678	585,45	7. 156,221	156,221.	156,221.
Form 990-PF	0	ther Profes	sional Fees	St	catement 2
Description		(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
SCHARF INVESTMENT MO GOLD INVESTMENT EXPI DAVID CLEARY PROF. A	ENSES	20,539. 467. 0.	20,539. 467. 0.	0. 0. 0.	0. 0. 0.
To Form 990-PF, Pg	1, ln 16c =	21,006.	21,006.	0.	0.
Form 990-PF		Tax	es	SI	tatement 3
Description		(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
FRANCHISE TAX BOARD FOREIGN TAX PAID ATTY GENERAL'S REGIS	 STRY OF	10. 4,727.	10. 4,727.	0.	0.
CHARITABLE TRUSTS		225.	225.	0.	0.
To Form 990-PF, Pg	l, ln 18	4,962.	4,962.	0.	0.

Form 990-PF	Other Expenses		Statement 4	
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
GW WADE INVESTMENT MANAGEMENT NFS ACCOUNT FEES	23,248.	23,248.	0.	0.
To Form 990-PF, Pg 1, ln 23	23,330.	23,330.	0.	0.

1 שם דחחה גם