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Form

990-PF

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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

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▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

2015

Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015, and ending 12-31-2015

Name of foundation ATKINSON FOUNDATION C/O PACIFIC FOUNDATION SERVICES		A Employer identification number 94-6075613	
Number and street (or P O box number if mail is not delivered to street address) 1660 BUSH STREET NO 300		B Telephone number (see instructions) (415) 561-6540	
City or town, state or province, country, and ZIP or foreign postal code SAN FRANCISCO, CA 94019		C If exemption application is pending, check here ☐	
G Check all that apply ☐ Initial return ☐ Final return ☐ Address change		D 1. Foreign organizations, check here ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ☐ E If private foundation status was terminated under section 507(b)(1)(A), check here ☐ F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐	
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation			
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 20,958,074		J Accounting method ☐ Cash ☒ Accrual ☐ Other (specify) _____ (Part I, column (d) must be on cash basis.)	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		Revenue and expenses per (a) books	Net investment (b) income	Adjusted net (c) income	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1	Contributions, gifts, grants, etc , received (attach schedule)	1,056,300		
	2	Check ☐ if the foundation is not required to attach Sch B			
	3	Interest on savings and temporary cash investments	2,000	2,000	
	4	Dividends and interest from securities	385,120	385,120	
	5a	Gross rents			
	b	Net rental income or (loss) _____			
	6a	Net gain or (loss) from sale of assets not on line 10	1,472,220		
	b	Gross sales price for all assets on line 6a 4,877,854			
	7	Capital gain net income (from Part IV, line 2) . . .		1,472,220	
	8	Net short-term capital gain			
	9	Income modifications			
	10a	Gross sales less returns and allowances			
Operating and Administrative Expenses	b	Less Cost of goods sold			
	c	Gross profit or (loss) (attach schedule)			
	11	Other income (attach schedule)	5,480	5,480	
	12	Total.Add lines 1 through 11	2,921,120	1,864,820	
	13	Compensation of officers, directors, trustees, etc	98,963	19,793	79,170
	14	Other employee salaries and wages			
	15	Pension plans, employee benefits	2,812	562	1,779
	16a	Legal fees (attach schedule).			
	b	Accounting fees (attach schedule).	37,100	18,550	11,600
	c	Other professional fees (attach schedule)	161,933	109,933	52,000
	17	Interest			
	18	Taxes (attach schedule) (see instructions) . . .	4,958	1,572	6,286
	19	Depreciation (attach schedule) and depletion . . .	427	0	
	20	Occupancy	15,745	3,149	12,596
	21	Travel, conferences, and meetings.			
	22	Printing and publications			
	23	Other expenses (attach schedule).	26,767	5,723	22,403
	24	Total operating and administrative expenses. Add lines 13 through 23	348,705	159,282	185,834
	25	Contributions, gifts, grants paid	820,050		745,050
	26	Total expenses and disbursements.Add lines 24 and 25	1,168,755	159,282	930,884
	27	Subtract line 26 from line 12			
	a	Excess of revenue over expenses and disbursements	1,752,365		
	b	Net investment income (if negative, enter -0-)		1,705,538	
	c	Adjusted net income(if negative, enter -0-) . . .			

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing	53,186	83,438	83,438
	2	Savings and temporary cash investments	664,886	592,296	592,296
	3	Accounts receivable ▶ <u>8,539</u>			
		Less allowance for doubtful accounts ▶ _____	13,683	8,539	8,539
	4	Pledges receivable ▶ _____			
		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) ▶ _____			
		Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges	805	1,351	1,351
	10a	Investments—U S and state government obligations (attach schedule)	28,957	28,957	26,430
	b	Investments—corporate stock (attach schedule)	10,131,598	11,553,103	14,946,035
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶ _____			
		Less accumulated depreciation (attach schedule) ▶ _____			
Liabilities	12	Investments—mortgage loans.			
	13	Investments—other (attach schedule)	4,734,631	5,110,809	5,234,160
	14	Land, buildings, and equipment basis ▶ <u>13,348</u>			
		Less accumulated depreciation (attach schedule) ▶ <u>12,958</u>	817	390	390
	15	Other assets (describe ▶ _____)	844	65,435	65,435
	16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	15,629,407	17,444,318	20,958,074
	17	Accounts payable and accrued expenses	25,560	44,937	
	18	Grants payable	260,000	335,000	
Net Assets or Fund Balances	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule).			
	22	Other liabilities (describe ▶ _____)	126,969	95,138	
	23	Total liabilities (add lines 17 through 22)	412,529	475,075	
		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			
		Foundations that do not follow SFAS 117, check here ▶ ☒ and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds	0	0	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	15,216,878	16,969,243	
	30	Total net assets or fund balances (see instructions)	15,216,878	16,969,243	
	31	Total liabilities and net assets/fund balances (see instructions)	15,629,407	17,444,318	

Part III Analysis of Changes in Net Assets or Fund Balances		
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return)	1 15,216,878
2	Enter amount from Part I, line 27a	2 1,752,365
3	Other increases not included in line 2 (itemize) ▶ _____	3 0
4	Add lines 1, 2, and 3	4 16,969,243
5	Decreases not included in line 2 (itemize) ▶ _____	5 0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6 16,969,243

Part IV

Capital Gains and Losses for Tax on Investment Income

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)		How acquired P—Purchase (b) D—Donation	Date acquired (c) (mo , day, yr)	Date sold (d) (mo , day, yr)
1 a	CHARLES SCHWAB TRANSACTIONS	P		
b	US BANK TRANSACTIONS	P		
c	US BANK SPIN OFFS	P		
d				
e				

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
a 2,453,588		1,921,209	532,379
b 2,018,072		1,484,425	533,647
c 406,194			406,194
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) or (l) Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
a			532,379
b			533,647
c			406,194
d			
e			

2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	1,472,220
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	}	3	

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)
If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014	726,451	20,142,118	0 036066
2013	622,407	17,905,863	0 034760
2012	716,969	15,836,017	0 045275
2011	717,522	15,349,696	0 046745
2010	853,304	14,729,205	0 057933

2	Total of line 1, column (d).	2	0 220779
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 044156
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	4	20,393,745
5	Multiply line 4 by line 3.	5	900,506
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	17,055
7	Add lines 5 and 6.	7	917,561
8	Enter qualifying distributions from Part XII, line 4.	8	930,884

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

Part VI

Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a		Exempt operating foundations described in section 4940(d)(2), check here ☐			
		and enter "N/A" on line 1			
		Date of ruling or determination letter _____			
		(attach copy of letter if necessary—see instructions)			
b		Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☒ and enter 1% of Part I, line 27b		1	17,055
c		All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
2		Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0
3		Add lines 1 and 2.		3	17,055
4		Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0
5		Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	17,055
6		Credits/Payments			
a		2015 estimated tax payments and 2014 overpayment credited to 2015	6a	34,880	
b		Exempt foreign organizations—tax withheld at source	6b		
c		Tax paid with application for extension of time to file (Form 8868).	6c		
d		Backup withholding erroneously withheld	6d		
7		Total credits and payments. Add lines 6a through 6d.		7	34,880
8		Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached.		8	
9		Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	
10		Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.		10	17,825
11		Enter the amount of line 10 to be Credited to 2015 estimated tax ☐ 0 Refunded ☐		11	17,825

Part VII-A

Statements Regarding Activities

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>	1b		No
c	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation ☐ \$ _____ 0 (2) On foundation managers ☐ \$ _____ 0			
e	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? <i>If "Yes," attach a detailed description of the activities.</i>	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes.</i>	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions): ☐ CA			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation.</i>	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV.</i>	9		No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>	10		No

Part VII-A

Statements Regarding Activities *(continued)*

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address WWWATKINSONFDN.ORG	13	Yes	
14	The books are in care of ROBERT DEROSA Telephone no (415) 561-6540 Located at 1660 BUSH STREET SUITE 300 SAN FRANCISCO CA ZIP+4 94019			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here ☐ and enter the amount of tax-exempt interest received or accrued during the year 15			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes", enter the name of the foreign country 	16	Yes	No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ No (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)? ☐ Yes ☒ No (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). ☐ Yes ☒ No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? ☐ Organizations relying on a current notice regarding disaster assistance check here. ☐	1b		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015? ☐	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? ☐ Yes ☒ No If "Yes," list the years 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions). ☐	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No			
b	If "Yes," did it have excess business holdings in 2015 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 Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015.</i>) ☐	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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 2015?	4b		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a

During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions).

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No

b

If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b

Organizations relying on a current notice regarding disaster assistance check here.

☒

c

If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945–5(d).

6a

Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

b

Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

No

If "Yes" to 6b, file Form 8870.

7a

At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1

List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				

2

Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
NONE				

Total number of other employees paid over \$50,000.

0

Part VIII

3 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.	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 number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See instructions	
3	

[illegible]

Part X

Minimum Investment Return

(All domestic foundations must complete this part. Foreign foundations,see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	19,572,625
b	Average of monthly cash balances.	1b	1,131,685
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	20,704,310
e	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	20,704,310
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	310,565
5	Net value of noncharitable-use assets.Subtract line 4 from line 3 Enter here and on Part V, line 4	5	20,393,745
6	Minimum investment return.Enter 5% of line 5.	6	1,019,687

Part XI

Distributable Amount

(see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☒ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	1,019,687
2a	Tax on investment income for 2015 from Part VI, line 5.	2a	17,055
b	Income tax for 2015 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	17,055
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	1,002,632
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	1,002,632
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	1,002,632

Part XII

Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	930,884
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions.Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	930,884
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).	5	17,055
6	Adjusted qualifying distributions.Subtract line 5 from line 4.	6	913,829

Note:The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				1,002,632
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2015				
a From 2010.	130,333			
b From 2011.				
c From 2012.				
d From 2013.				
e From 2014.				
f Total of lines 3a through e.	130,333			
4 Qualifying distributions for 2015 from Part XII, line 4				
a Applied to 2014, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2015 distributable amount.				930,884
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a).)	71,748			71,748
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	58,585			
b Prior years' undistributed income Subtract line 4b from line 2b.		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions.		0		
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions.			0	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015.				0
7 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).	0			
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions).	58,585			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a.	0			
10 Analysis of line 9				
a Excess from 2011.				
b Excess from 2012.				
c Excess from 2013.				
d Excess from 2014.				
e Excess from 2015.				

Part XIV

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling.

b Check box to indicate whether the organization is a private operating foundation described in section 170(c)(2)(B)(i) or 170(c)(2)(B)(ii): ☐ 170(c)(2)(B)(i) or ☐ 170(c)(2)(B)(ii)

		Tax year	Prior 3 years			(e) Total
		(a) 2015	(b) 2014	(c) 2013	(d) 2012	
2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b	85% of line 2a					
c	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
e	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
a	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on 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 Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)**

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

ROBERT DEROSA
1660 BUSH STREET SUITE 300
SAN FRANCISCO, CA 94019
(415) 561-6540
ATKINFNDN@AOL.COM

b The form in which applications should be submitted and information and materials they should include

A COMPLETED GRANT REQUEST OBTAINED FROM THE FOUNDATION MUST BE FILED THE ORGANIZATION'S NAME, ADDRESS, TELEPHONE NUMBER AND THE NAME OF THE EXECUTIVE DIRECTOR MUST BE INCLUDED THE NAMES AND AFFILIATIONS OF THE ORGANIZATION'S OFFICERS AND DIRECTOR ARE INCLUDED ON THE FORM ALSO TO BE INCLUDED ARE A BRIEF STATEMENT OUTLINING THE ORGANIZATION'S GOALS AND SERVICES PLUS THE ANNUAL REPORT THE APPLICANTS MUST INCLUDE A DESCRIPTION OF THE PROPOSED PROGRAM SHOWING THE NEED, THE POPULATION TO BE SERVED, SPECIFIC OBJECTIVES AND ACTIVITIES THEY MUST PROVIDE A PROGRAM BUDGET WITH PROJECTED INCOME AND EXPENSES ALSO TO BE PROVIDED IS A COPY OF THE IRS LETTER SHOWING THAT THE ORGANIZATION IS TAX EXEMPT UNDER SEC 501(C)(3) AND THAT IT IS NOT A PRIVATE FOUNDATION THEY SHOULD ALSO INCLUDE ANY SUPPLEMENTAL INFORMATION THAT WOULD STRENGTHEN THE APPLICATION

c Any submission deadlines
DEADLINES FOR PROPOSALS ARE FEB 1, MAY 1, AUG 1, & NOV 1

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

NOT FUNDED BY FOUNDATION, GRANTS TO IND, GRANTS TO DOCTORAL STUDY OR RESEARCH, GRANTS TO INFLUENCE LEGISLATION, GRANTS TO NAT'L OR STATEWIDE PROGRAMS, DONATIONS TO OR SPONSORSHIP OF FUNDRAISING OR ANNUAL CAMPAIGNS, OR GRANTS FOR FILMS, VIDEOS, PUBLICATIONS AND CONFERENCES

Part XV

Supplementary Information(continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			3a	745,050
b <i>Approved for future payment</i> COASTSIDE ADULT COMM CTR 925 MAIN ST HALF MOON BAY,CA 94019		NON PROFIT	2016 CONTRIBUTION	25,000
CURIODYSSEY 1651 COYOTE POINT DRIVE SAN MATEO,CA 94401		NON PROFIT	2016 CONTRIBUTION	50,000
Total			3b	75,000

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount		
1 Program service revenue						
a _____						
b _____						
c _____						
d _____						
e _____						
f _____						
g Fees and contracts from government agencies						
2 Membership dues and assessments.						
3 Interest on savings and temporary cash investments			14	2,000		
4 Dividends and interest from securities. . . .			14	385,120		
5 Net rental income or (loss) from real estate						
a Debt-financed property.						
b Not debt-financed property.						
6 Net rental income or (loss) from personal property						
7 Other investment income.			14	5,480		
8 Gain or (loss) from sales of assets other than inventory			18	1,472,220		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue a _____						
b _____						
c _____						
d _____						
e _____						
12 Subtotal Add columns (b), (d), and (e). . .		0		1,864,820	0	
13 Total. Add line 12, columns (b), (d), and (e).			13	1,864,820	1,864,820	

(See worksheet in line 13 instructions to verify calculations)

[illegible]

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation(If not paid, enter -0-)	Contributions to employee benefit plans and deferred compensation (d)	(e) Expense account, other allowances
ELIZABETH H CURTIS	VP, ADMINISTRATION/DIRECTOR 40 00	98,963	2,812	0
1660 BUSH STREET SUITE 300 SAN FRANCISCO,CA 94019				
OLIVIA O ARANDA	DIRECTOR 1 00	0	0	0
1660 BUSH STREET SUITE 300 SAN FRANCISCO,CA 94019				
JEAN S ATKINSON	SECRETARY/DIRECTOR 2 00	0	0	0
1660 BUSH STREET SUITE 300 SAN FRANCISCO,CA 94019				
SUSAN R ATKINSON	DIRECTOR 1 00	0	0	0
1660 BUSH STREET SUITE 300 SAN FRANCISCO,CA 94019				
JAMES R AVEDISIAN	VP, FINANCE/TREASURER/DIR 2 00	0	0	0
1660 BUSH STREET SUITE 300 SAN FRANCISCO,CA 94019				
WILLIAM W CRANDALL JR	ASST TREASURER/DIRECTOR 1 00	0	0	0
1660 BUSH STREET SUITE 300 SAN FRANCISCO,CA 94019				
ROBERT H GRIFFIN	DIRECTOR 1 00	0	0	0
1660 BUSH STREET SUITE 300 SAN FRANCISCO,CA 94019				
JOHN E HERRELL	DIRECTOR 1 00	0	0	0
1660 BUSH STREET SUITE 300 SAN FRANCISCO,CA 94019				
LINDA L LANIER	PRESIDENT/DIRECTOR 2 00	0	0	0
1660 BUSH STREET SUITE 300 SAN FRANCISCO,CA 94019				
STEPHEN A WAY	DIRECTOR 1 00	0	0	0
1660 BUSH STREET SUITE 300 SAN FRANCISCO,CA 94019				
ELIZABETH S WOODWARD	DIRECTOR 1 00	0	0	0
1660 BUSH STREET SUITE 300 SAN FRANCISCO,CA 94019				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
ADELANTE FOUNDATION PO BOX 200280 DENVER,CO 80220		NON PROFIT	2016 MICROFINANCE FOR HONDURAS	10,000
ADOLESCENT COUNSELING SERVICES 643 BLAIR ISLAND ROADSTE 301 REDWOOD CITY,CA 94063		NON PROFIT	OUTLET PROGRAM-SUPPORT FOR LGBTQQ YOUTH	5,000
AIM HIGH FOR HIGH SCHOOL PO BOX 410715 SAN FRANCISCO,CA 94141		NON PROFIT	SUMMER ACADEMIC PROGRAMS, REDWOOD CITY, EAST PALO ALTO	5,000
ASSISTANCE LEAGUE OF SAN MATEO COUNTY 528 N SAN MATEO DR SAN MATEO,CA 94401		NON PROFIT	OPERATION SCHOOL BELL	5,000
BIOTECH PARTNERS PO BOX 2186 BERKELEY,CA 94702		NON PROFIT	BIOTECH PARTNERS-BIOTECH ACADEMY AT SOUTH SAN FRANCISCO HIGH SCHOOL	7,500
BOYS & GIRLS CLUBS OF THE COASTSIDE PO BOX 545 HALF MOON BAY,CA 94019		NON PROFIT	COUNT ME IN!	10,000
BOYS & GIRLS CLUBS OF NORTH SAN MATEO COUNTY 201 WEST ORANGE AVE SOUTH SAN FRANCISCO,CA 94080		NON PROFIT	TRIPLE PLAY PROGRAM	5,000
BOYS & GIRLS CLUBS OF THE PENINSULA 401 PIERCE ROAD MENLO PARK,CA 94025		NON PROFIT	BGCP HIGH SCHOOL PROGRAMS	7,500
BREAST CANCER CONNECTIONS 2335 EL CAMINO REAL PALO ALTO,CA 94306		NON PROFIT	GABRIELLA PASTER PROGRAM	5,000
BURLINGAME UNITED METHODIST CHURCH 1443 HOWARD AVE BURLINGAME,CA 94010		NON PROFIT	YOUTH PROGRAMS- GEORGE H ATKINSON MEMORIAL RECURRING GIFT	5,000
CALIFORNIA CLUBHOUSE PO BOX 1952 BURLINGAME,CA 94010		NON PROFIT	CALIFORNIA CLUBHOUSE	5,000
CAMINAR 2600 SO EL CAMINO REAL STE 200 SAN MATEO,CA 94403		NON PROFIT	JOB PLUS	5,000
CATHOLIC CHARITIES 990 EDDY STREET SAN FRANCISCO,CA 94109		NON PROFIT	ADULT DAY SERVICES SAN MATEO COUNTY	5,000
CHILDREN'S EMPOWERMENT INC 480 COLLINS AVE SUITE J COLMA,CA 94014		NON PROFIT	LEARNING CENTER	5,000
CHRISTIAN ACTION LIFE LINECALL- PRIMROSE CENTER 139 PRIMROSE RD BURLINGAME,CA 94010		NON PROFIT	SUMMER LUNCH PROGRAM	10,000
Total 3a				745,050

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
CITY OF REDWOOD CITY- FAIR OAKS COMMUNITY CENTER 2600 MIDDLEFIELD ROAD REDWOOD CITY,CA 94063		NON PROFIT	FAIR OAKS COMMUNITY CENTER INFORMATION AND REFERRAL PROGRAM	5,000
COASTSIDE ADULT DAY HEALTH CENTER 925 MAIN STREET HALF MOON BAY,CA 94019		NON PROFIT	COASTSIDE SENIOR CENTER CAPITAL GRANT	75,000
COASTSIDE CHILDHOOD DEVELOPMENT CENTER PO BOX 84 HALF MOON BAY,CA 94019		NON PROFIT	SUBSIDIZED CHILD CARE AND EDUCATION PROGRAM AND AN EARLY INTERVENTION PROGRAM FOR AT-RISK CHILDREN	7,500
COASTSIDE HOPE PO BOX 1089 EL GRANADA,CA 94018		NON PROFIT	CRITICAL FAMILY NEEDS SAFETY NET	10,000
COMMUNITY LEGAL SERVICES OF EAST PALO ALTO 1861 BAY ROAD EAST PALO ALTO,CA 94303		NON PROFIT	GENERAL PROGRAM SUPPORT	10,000
CONCERN AMERICA PO BOX 1790 SANTA ANA,CA 92702		NON PROFIT	COMMUNITY HEALTH PROJECT, PETEN, GUATEMALA	5,000
CONGREGATIONAL CHURCH OF SAN MATEO 225 TILTON AVE SAN MATEO,CA 94401		NON PROFIT	THE POWER OF STORIES IN SOCIAL TRANSFORMATION	7,500
CORA COMMUNITY OVERCOMING RELATIONSHIP ABUSE 2211 PALM AVE SAN MATEO,CA 94402		NON PROFIT	2015 CONTRIBUTION	5,000
COUNCIL ON FOUNDATIONS 2121 CRYSTAL DRIVE SUITE 700 ARLINGTON,VA 22202		NON PROFIT	2015 ANNUAL MEMBERSHIP DUES- GRANT PORTION	1,350
CURIODYSSEY 1651 COYOTE POINT DRIVE SAN MATEO,CA 94401		NON PROFIT	CURIODYSSEY LOW-INCOME OUTREACH	7,500
CURIODYSSEY 1651 COYOTE POINT DRIVE SAN MATEO,CA 94401		NON PROFIT	RAY N ATKINSON MEMORIAL GIFT TO CAPITAL CAMPAIGN	50,000
DRAWBRIDGE PO BOX 2698 SAN RAFAEL,CA 94912		NON PROFIT	DRAWBRIDGE ART PROGRAM FOR UNDERSERVED CHILDREN	6,450
EACH ONE REACH ONE 146 SOUTH SPRUCE SOUTH SAN FRANCISCO,CA 94080		NON PROFIT	AGENERAL OPERATING SUPPORT- COMMUNITY BRIDGES PROGRAM	7,500
EAST PALO ALTO BOXING CLUB 2369 UNIVERSITY AVE EAST PALO ALTO,CA 94303		NON PROFIT	EPABC COMMUNITY CENTER	5,000
EASTSIDE COLLEGE PREPARATORY SCHOOL 1041 MYRTLE STREET EAST PALO ALTO,CO 94303		NON PROFIT	2016 SUMMER SESSION	7,500
Total				745,050

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
EASTSIDE COLLEGE PREPARATORY SCHOOL 1041 MYRTLE STREET EAST PALO ALTO,CA 94303		NON PROFIT	MIDDLE SCHOOL READING PROGRAM	10,000
ECOLOGIC DEVELOPMENT FUND 25 MT AUBRUN ST 203 CAMBRIDGE,MA 02138		NON PROFIT	BUILDING LOCAL CAPACITY FOR IMPROVED FOOD SECURITY AND FOREST MANAGEMENT IN GUATEMALA'S WESTERN HIGHLANDS	5,000
EL CENTRO DE LIBERTAD 500 ALLERTON REDWOOD CITY,CA 94063		NON PROFIT	COASTSIDE YOUTH INTERVENTION PROGRAM	5,000
EL PORVENIR 80 GARDEN CENTER SUITE 135 BROOMFIELD,CO 80020		NON PROFIT	WATER, SANITATION, HEALTH IN RURAL NICARAGUA	5,000
ELKUS RANCH ENVIRONMENTAL EDUCATION CENTER 80 STONE PINE ROAD 100 HALF MOON BAY,CA 94019		NON PROFIT	SCHOLARSHIP PROGRAM SUPPORT	7,000
EXPONENT PHILANTHROPY 1720 N ST NW WASHINGTON,DC 20036		NON PROFIT	ANNUAL SUPPORTING CONTRIBUTION	1,250
FOUNDATION CENTER 312 SUTTER STREET SUITE 606 SAN FRANCISCO,CA 94108		NON PROFIT	GENERAL SUPPORT, FOUNDATION CENTER	2,500
FOUNDATION FOR A COLLEGE EDUCATION PO BOX 50518 EAST PALO ALTO,CA 94303		NON PROFIT	FCE SUMMER FUNDAMENTALS	7,500
FRIENDS FOR YOUTH 1741 BROADWAY FIRST FLOOR REDWOOD CITY,CA 94063		NON PROFIT	WHY MENTORING? WHOLE HEALTH FOR YOUTH	7,500
FRIENDSHIP BRIDGE 405 URBAN ST LAKEWOOD,CO 80228		NON PROFIT	MICROCREDIT/EDUCATION PROGRAMS FOR IMPOVERISHED WOMEN, GUATEMALA	5,000
GIRLS TO WOMEN PO BOX 50368 EAST PALO ALTO,CA 94303		NON PROFIT	GENERAL OPERATING SUPPORT- AFTER SCHOLL ACADEMIC PROGRAM	5,000
GRASSROOTS INTERNATIONAL 179 BOYLSTON STREET 4TH FLOOR BOSTON,MA 02130		NON PROFIT	WOMEN'S VEGATABLE GARDEN /EMPOWERMENT PROJECT, GUATEMALA	5,000
THE GRATEFUL GARMENT PROJECT 1821 SO BASCOM AVE 206 CAMPBELL,CA 95008		NON PROFIT	GARMENTS FOR DIGNITY PROGRAM - SUPPORT FOR VICTIMS OF SEXUAL ASSAULT	2,500
HEALTH CONNECTED 480 JAMES AVE REDWOOD CITY,CA 94062		NON PROFIT	RAVENSWOOD AND REDWOOD CITY REPRODUCTIVE HEALTH PROJECT	7,500
HEALTHY CITIES TUTORING INC PO BOX 653 SAN CARLOS,CA 94070		NON PROFIT	HEALTHY CITIES TUTORING - CLIFFORD AND FAIR OAKS SCHOOLS	7,500
Total				745,050

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
HILLCREST CHAPLAINCY & MINISTRIES 222 PAUL SCANNELL DRIVE SAN MATEO, CA 94402		NON PROFIT	HILLCREST CHAPLAINCY AND MINISTRIES GENERAL PROGRAM	7,500
HIP HOUSING DEVELOPMENT CORPORATION 364 SOUTH RAILROAD AVE SAN MATEO, CA 94401		NON PROFIT	HOME SHARING PROGRAM	7,500
HOME AND HOPE 1720 EL CAMINO REAL 7 BURLINGAME, CA 94010		NON PROFIT	INTERFAITH FAMILY SHELTERING PROGRAM	10,000
HONDURAS GOOD WORKS PO BOX 877 LIBERTY HILL, TX 78842		NON PROFIT	HONDURAS NATURAL STONE TILE COOPERATIVE	5,000
HOPE 2 ONE LIFE PO BOX 21112 BILLINGS, MT 59104		NON PROFIT	KATAMARWA SCHOOL WATER SUPPLY WELL	8,500
INSTITUTO LABORAL DE LA RAZA 2947 SIXTEEN STREET SAN FRANCISCO, CA 94103		NON PROFIT	SAN MATEO COUNTY PROGRAM SUPPORT	5,000
INTERCOMMUNAL PRESCHOOL 713 2ND AVE SAN MATEO, CA 94401		NON PROFIT	GENERAL PROGRAM SUPPORT	7,500
INTERNATIONAL INSTITUTE OF THE BAY AREA 657 MISSION STREET 500 SAN FRANCISCO, CA 94105		NON PROFIT	LEGAL SERVICES FOR IMMIGRANT FAMILIES IN SAN MATEO COUNTY	5,000
INTERSECTION 901 MISSIONS STREET SUITE 306 SAN FRANCISCO, CA 94134		NON PROFIT	THE BEAT WITHIN	5,000
KATERI TEKAKWITHA MISSION FUND INC PO BOX 906 PACIFICA, CA 94044		NON PROFIT	CHUMANZANA ORGANIC GARDENING PROJECT	2,000
LA RAZA CENTRO LEGAL 474 VALENCIA STREET SUITE 295 SAN FRANCISCO, CA 94103		NON PROFIT	IMMIGRANT LEGAL SERVICES AND OUTREACH, SAN MATEO COUNTY	5,000
LIFEMOVES 181 CONSTITUTION DRIVE MENLO PARK, CA 94025		NON PROFIT	FIRST STEP FOR FAMILIES	7,500
LOVED TWICE 4123 BROADWAY SUITE 815 OAKLAND, CA 84611		NON PROFIT	CLOTHING HOMELESS BABIES IN SAN MATEO COUNTY	5,000
MANNA PROJECT INTERNATIONAL POBOX 536144 ORLANDO, FL 32853		NON PROFIT	COMPREHENSIVE HEALTH PROJECT IN VILLA GUADALUPE, NICARAGUA	5,000
MARINE SCIENCE INSTITUTE 500 DISCOVERY PARKWAY REDWOOD CITY, CA 94063		NON PROFIT	DISCOVER OUR BAY - HANDS ON SCIENCE EDUCATION	7,500
Total				745,050

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NATIONAL SOCIETY TO PREVENT BLINDNESS 1388 SUTTER STREET SUITE 408 SAN FRANCISCO,CA 94109		NON PROFIT	SEE WELL TO LEARN - COMPREHENSIVE EARLY VISION INTERVENTION FOR LOW-INCOME UNDERSERVED HALF MOON BAY PRESCHOOLERS	2,500
OMBUDSMAN SERVICES OF SAN MATEO COUNTY INC 711 NEVADA ST REDWOOD CITY,CA 94061		NON PROFIT	OMBUDSMAN SERVICES OF SAN MATEO COUNTY, INC	7,500
PACIFICA SCHOOL VOLUNTEERS 375 REINA DEL MAR PACIFICA,CA 94044		NON PROFIT	LITERACY CHAMPIONS PROGRAM	7,500
PACIFICANS CARE PO BOX 875 PACIFICA,CA 94044		NON PROFIT	FOR PEDRO POINT FIREHOUSE	2,500
PENINSULA BRIDGE PO BOX 963 MENLO PARK,CA 94026		NON PROFIT	CAPACITY BUILDING PROJECT - 12 YEAR (5TH GRADE- COLLEGE) PROGRAM MODEL	7,500
PENINSULA FAMILY SERVICE 24 SECOND AVENUE SAN MATEO,CA 94401		NON PROFIT	FAMILY ENGAGEMENT SERVICES AT CHILD DEVELOPMENT CENTERS	7,500
PHASE 2 CAREERS 1152 BALCLUTHA DR FOSTER CITY,CA 94404		NON PROFIT	INTENSIVE JOB SEARCH TRAINING	2,500
PHILANTHROPIC VENTURES 2780 JUNIPERO SERRA BLVD DALY CITY,CA 94015		NON PROFIT	BEHAVIORAL HEALTH COUNSELING FOR DISADVANTAGED YOUTH AND THEIR FAMILIES AT THE DALY CITY YOUTH HEALTH CENTER	5,000
PIE RANCH PO BOX 363 PESCADERO,CA 94060		NON PROFIT	SAN MATEO COUNTY YOUTH EDUCATION PROGRAM	5,000
PLANT WITH PURPOSE 4747 MORENA BLVD SUITE 100 SAN DIEGO,CA 92117		NON PROFIT	EMPOWERING RURAL FARMING COMMUNITIES IN MEXICO	5,000
PUENTE A LA SALUD COMUNITARIA 1311-A E 6TH ST AUSTIN,TX 78702		NON PROFIT	GENERAL SUPPORT - IMPROVING NUTRITION THROUGH AMARANTH CULTIVATION	5,000
PUENTE DE LA COSTA SUR PO BOX 554 PESCADERO,CA 94060		NON PROFIT	GENERAL PROGRAM SUPPORT	20,000
THE RAINBOW NETWORK INC 2840 E CHESTNUT EXPRESSWAY SUITE A SPRINGFIELD,MO 65802		NON PROFIT	HEALTHCARE/NUTRITION	5,000
RAPE TRAUMA SERVICES 1860 EL CAMINO REAL SUITE 406 BURLINGAME,CA 94010		NON PROFIT	RAPE TRAMA SERVICES	5,000
REBUILDING TOGETHER PENINSULA 841 KAYNYNE ST REDWOOD CITY,CA 94063		NON PROFIT	REHABILITATION OF NONPROFIT FACILITIES	10,000
Total			3a	745,050

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
REDWOOD CITY POLICE ACTIVITIES LEAGUE 3399 BAY ROAD REDWOOD CITY,CA 94063		NON PROFIT	PAL AFTER SCHOOL ENRICHMENT PROGRAM	7,500
RENAISSANCE ENTREPRENEURSHIP CENTER 275 FIFTH ST SAN FRANCISCO,CA 94103		NON PROFIT	ENTREPRENEURSHIP TRAINING/SUPPORT SVCS , SM COUNTY	5,000
SAMARITAN HOUSE PO BOX 53 BRISBANE,CA 94005		NON PROFIT	SAMARITAN HOUSE CLIENT SERVICES AND FOOD PROGRAMS	20,000
SAN MATEO COUNTY COMMUNITY COLLEGES FOUNDATION 3401 CSM DRIVE SAN MATEO,CA 94402		NON PROFIT	ATKINSON FOUNDATION SCHOLARSHIP FUND AT SAN MATEO COUNTY COMMUNITY COLLEGES FOUNDATION	21,000
SAN MATEO COUNTY PARKS FOUNDATION 215 BAY ROAD MENLO PARK,CA 94025		NON PROFIT	YOUTH CONSERVATION CREWS, SAN MATEO CO PARKS	5,000
SAN MATEO COUNTY SHERIFFS ACTIVITIES LEAGUE 3151 EDISON WAY REDWOOD CITY,CA 94063		NON PROFIT	LITERACY PROGRAM AT MOONRIDGE, MENTORING PROGRAM WITH PILARCITOS AND CUNHA, EMPOWERING YOUNG WOMEN AT HALF MOON BAY	5,000
SAN MATEO POLICE ACTIVITIES LEAGUE 200 FRANKLIN PARKWAY SAN MATEO,CA 94403		NON PROFIT	GREAT PROGRAM - GANG RESISTANCE, EDUCATION AND TRAINING	10,000
SAN MATEO YOUTH FOUNDATION 409 SEVILLE WAY SAN MATEO,CA 94402		NON PROFIT	COLLEGE MENTORING /SCHOLARSHIP PROGRAM	10,000
SEED PROGRAMS INTERNATIONAL PO BOX 9163 ASHVILLE,NC 20815		NON PROFIT	FOOD SECURITY PROGRAMS, GUATEMALA	5,000
SEQUOIA ADULT SCHOOL SCHOLARS 3481 JANICE WAY PALO ALTO,CA 94303		NON PROFIT	ADULT SCHOOL SCHOLARS SCHOLARSHIPS	7,500
SPARK PROGRAM 555 DE HARO ST SUITE 30094107 SAN FRANCISCO,CA 94103		NON PROFIT	YOUTH APPRENTICESHIPS, REDWOOD CITY PROGRAM	5,000
ST FRANCIS CENTER OF REDWOOD CITY 151 BUCKINGHAM AVENUE REDWOOD CITY,CA 94063		NON PROFIT	NORTH FAIR OAKS YOUTH INITIATIVE	7,500
STARVISTA 610 ELM ST 212 SAN CARLOS,CA 94070		NON PROFIT	HEALTHY HOMES PROJECT - DOMESTIC VIOLENCE COUNSELING/PREVENTION	5,000
STRATEGIES FOR INTERNATIONAL DEVELOPMENT 330 PENNSYLVANIA AVE SE SUITE 304 WASHINGTON,DC 20003		NON PROFIT	WOMEN COFFEE FARMERS PROJECT	5,000
SUSTAINABLE HARVEST INTERNATIONAL PO BOX 1447 ELLSWORTH,ME 04605		NON PROFIT	AGRICULTURE EXTENSION PROGRAM	5,000
Total				745,050

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TEEN SUCCESS INC SOBRATO CENTER FOR NONPROFITS 608 VALLEY WAY MILPITAS,CA 95035		NON PROFIT	TEEN MOTHERS SUPPORT GROUP, REDWOOD CITY	5,000
TREES WATER & PEOPLE 633 REMINGTON ST FT COLLINS,CO 80524		NON PROFIT	IMPROVING HEALTH & PROTECTING FORESTS IN GUATEMALA	5,000
VIA REHABILITATION SERVICES INC 2851 PARK AVENUE SANTA CLARA,CA 95050		NON PROFIT	SPECIAL NEEDS SCIENCE & ENVIRONMENTAL EDUCATION CAMP FOR SPECIAL DAY CLASSES IN SAN MATEO COUNTY SCHOOLS	5,000
VIDA VERDE NATURE EDUCATION 3540 LA HONDA ROAD HIGHWAY 84 SAN GREGORIO,CA 94074		NON PROFIT	GENERAL PROGRAM SUPPORT - ALL CLASSES 2015	7,500
WE TEACH SCIENCE FOUNDATION 405 PRIMROSE ROAD SUITE 200 BURLINGAME,CA 94010		NON PROFIT	REMOTE TUTORING/MENTORING, LACY MIDDLE SCHOOL, PACIFICA	5,000
XELA AID- PARTNERS FOR SELF RELIANCE 111 WEST OCEAN BLVD 409 LONG BEACH,CA 90802		NON PROFIT	HEALTH AND EMERGENCY RELIEF PROGRAM	5,000
YMCA OF SAN FRANCISCO 50 CALIFORNIA STREET SUITE 650 SAN FRANCISCO,CA 94111		NON PROFIT	YOUTH SERVICES BUREAU- SAN MATEO GENERAL SUPPORT FOR FAMILY CLINIC COUNSELING SERVICES	5,000
YOUTH COMMUNITY SERVICE 4120 MIDDLEFIELD ROAD ROOM P-8 PALO ALTO,CA 94303		NON PROFIT	GENERAL PROGRAM SUPPORT - LIFE SKILLS TRAINING THROUGH SERVICE	5,000
Total			3a	745,050

TY 2015 Accounting Fees Schedule**Name:** ATKINSON FOUNDATION

C/O PACIFIC FOUNDATION SERVICES

EIN: 94-6075613

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	37,100	18,550		11,600

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2015 Depreciation Schedule

Name: ATKINSON FOUNDATION
C/O PACIFIC FOUNDATION SERVICES
EIN: 94-6075613

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
COMPUTER EQUIPMENT	1995-06-15	5,164	5,164	SL	5 0000000000000	0	0		
COMPUTER EQUIPMENT	2003-01-02	1,330	1,330	SL	5 0000000000000	0	0		
SOFTWARE	1995-06-15	3,800	3,800	SL	3 0000000000000	0	0		
COPIER	1998-07-15	920	920	SL	5 0000000000000	0	0		
COMPUTER EQUIPMENT	2011-12-14	2,134	1,317	SL	5 0000000000000	427	0		

TY 2015 Investments Corporate Stock Schedule**Name:** ATKINSON FOUNDATION

C/O PACIFIC FOUNDATION SERVICES

EIN: 94-6075613

Name of Stock	End of Year Book Value	End of Year Fair Market Value
MARKETABLE SECURITIES	11,553,103	14,946,035

TY 2015 Investments Government Obligations Schedule

Name: ATKINSON FOUNDATION
C/O PACIFIC FOUNDATION SERVICES

EIN: 94-6075613

**US Government Securities - End of
Year Book Value:** 28,957

**US Government Securities - End of
Year Fair Market Value:** 26,430

**State & Local Government
Securities - End of Year Book
Value:** 0

**State & Local Government
Securities - End of Year Fair
Market Value:** 0

TY 2015 Investments - Other Schedule

Name: ATKINSON FOUNDATION

C/O PACIFIC FOUNDATION SERVICES

EIN: 94-6075613

Category / Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
MUTUAL FUNDS	FMV	3,507,031	3,639,763
FIXED INCOME	FMV	1,603,778	1,594,397

**TY 2015 Land, Etc.
Schedule**

Name: ATKINSON FOUNDATION

C/O PACIFIC FOUNDATION SERVICES

EIN: 94-6075613

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
COMPUTER EQUIPMENT	5,164	5,164	0	
COMPUTER EQUIPMENT	1,330	1,330	0	
SOFTWARE	3,800	3,800	0	
COPIER	920	920	0	
COMPUTER EQUIPMENT	2,134	1,744	390	

TY 2015 Other Assets Schedule**Name:** ATKINSON FOUNDATION

C/O PACIFIC FOUNDATION SERVICES

EIN: 94-6075613

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
SECURITY DEPOSIT	844	1,310	1,310
BEQUEST RECEIVABLE	0	46,300	46,300
EXCISE TAX REFUND RECEIVABLE	0	17,825	17,825

TY 2015 Other Expenses Schedule

Name: ATKINSON FOUNDATION

C/O PACIFIC FOUNDATION SERVICES

EIN: 94-6075613

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL PROCESSING FEES	2,414	483		1,726
MEMBERSHIPS	1,250	0		1,250
OFFICE SUPPLIES	897	269		693
ANNUAL REPORT & WEBSITE	191	0		191
PHONE	1,343	269		1,019
INSURANCE	3,141	628		3,139
POSTAGE	534	0		534
MEETINGS	4,193	1,258		3,862
STATE FILING FEES	180	90		90
COMPUTER/INTERNET	554	111		444
BANK FEES	670	335		335
TRANSITION FEES	11,400	2,280		9,120

TY 2015 Other Income Schedule

Name: ATKINSON FOUNDATION
C/O PACIFIC FOUNDATION SERVICES
EIN: 94-6075613

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
MISCELLANEOUS	5,480	5,480	5,480

TY 2015 Other Liabilities Schedule**Name:** ATKINSON FOUNDATION

C/O PACIFIC FOUNDATION SERVICES

EIN: 94-6075613

Description	Beginning of Year - Book Value	End of Year - Book Value
DEFERRED EXCISE TAX PAYABLE	55,255	35,138
EXCISE TAX PAYABLE	11,714	0
DEFERRED COMPENSATION PAYABLE	60,000	60,000

TY 2015 Other Professional Fees Schedule**Name:** ATKINSON FOUNDATION

C/O PACIFIC FOUNDATION SERVICES

EIN: 94-6075613

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FINANCIAL MGMT FEES	96,933	96,933		0
MANAGEMENT FEE	65,000	13,000		52,000

TY 2015 Taxes Schedule**Name:** ATKINSON FOUNDATION

C/O PACIFIC FOUNDATION SERVICES

EIN: 94-6075613

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAXES AND EXCISE TAXES	4,958	1,572		6,286

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 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
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Name of the organization ATKINSON FOUNDATION C/O PACIFIC FOUNDATION SERVICES	Employer identification number 94-6075613
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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	☒ 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 other 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 33¹/₃% 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), 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 990PF, 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 ATKINSON FOUNDATION C/O PACIFIC FOUNDATION SERVICES	Employer identification number 94-6075613
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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	LOIS M ATKINSON TRUST	\$ 1,056,300	Person ☒
	GUY F ATKINSON TRUSTEE 23700 CARLSO		Payroll ☐
	HAYWARD, CA 94541		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)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person ☐
			Payroll ☐
			Noncash ☐ (Complete Part II for noncash contributions)

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Employer identification number
94-6075613

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
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-			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
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-			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
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-			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
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-			