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EXTENDED TO NOVEMBER 15, 2017 **Return of Private Foundation**

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

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. OMB No 1545-0052

For c	alendar year 2016 or tax year beginning		, and ending			
	ne of foundation			A Employer identification	number	
	TORM CASTLE FOUNDATION					
	O SILVER LAKE			20-8681172		
	ber and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	0.0	
	775 SAND HILL ROAD		100	415-362-59		
	or town, state or province, country, and ZIP or foreign po	ostal code		C If exemption application is pe	nding, check here	
	ENLO PARK, CA 94025		1. 1		ahaali hasa	
G C	heck all that apply: Initial return	Initial return of a for	rmer public charity	D 1. Foreign organizations,	check here	
	Final return	Amended return Name change		Foreign organizations mee check here and attach cor	eting the 85% test,	
	heck type of organization: X Section 501(c)(3) ex		· · · · · · · · · · · · · · · · · · ·			
n U		Other taxable private founda	tion	E If private foundation stat under section 507(b)(1)(
I Fai	ir market value of all assets at end of year J Accounting		Accrual	F If the foundation is in a 6	•	
	· 1 —	her (specify)		under section 507(b)(1)		
→		mn (d) must be on cash b	pasis)		,-,,	
	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements	
	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)	
\Box	1 Contributions, gifts, grants, etc., received	500,900.	·	¾ N/A →	<i>2</i> 5'	
l	2 Check Inf the foundation is not required to attach Sch. B	1.70		\	, 🚓	
l	Interest on savings and temporary cash investments	333.	333.		STATEMENT 2	
Ì	4 Dividends and interest from securities	5,560.	5,560.		STATEMENT 3	
	5a Gross rents				À	
	Net rental income or (loss)	400 000	*/	y (A)		
<u>o</u>	6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 1 Q G 2 Q 1 1	<108,287.	<u> </u>	24.7	STATEMENT 1	
티	assets on line 6a		792,166.	** ``	2%	
Revenue	7 Capital gain net income (from Part IV, line 2)	(4)	194,100.		7**	
_i	8 Net short-term capital gain	<u> </u>				
	9 Income modifications 102 Gross sales less returns	· · · · · · · · · · · · · · · · · · ·	N N		FIVED	
	10a and allowances b Less Cost of goods sold			176	18	
	c Gross profit or (loss)			18 100	1 1 2017	
	11 Other income	<6,673.	> <16,673.	► ISI NUV	STATEMENT 4	
	12 Total. Add lines 1 through 11	391,833.	781,386.	المراسل المراسل	SEN LIT	
	13 Compensation of officers, directors, trustees, etc	0.	0.	1 00	Dervi O.	
	14 Other employee salaries and wages					
	15 Pension plans, employee benefits					
seuses	16a Legal fees					
pen	b Accounting fees STMT 5	3,700.	0.		0.	
EX						
tive	17 Interest	12 010	0.		0.	
Operating and Administrative	18 Taxes STMT 6	12,010.		<u>'</u>	0.	
ij	19 Depreciation and depletion					
d T	20 Occupancy 21 Travel, conferences, and meetings					
Þ	22 Printing and publications	<u> </u>		1		
gar	23 Other expenses STMT 7	694.	544.	,	0.	
ij	24 Total operating and administrative					
)ere	expenses. Add lines 13 through 23	16,404.	544	.	0.	
ŏ	25 Contributions, gifts, grants paid	450,000.			450,000	
	26 Total expenses and disbursements.					
	Add lines 24 and 25	466,404.	544		450,000	
	27 Subtract line 26 from line 12:					
	a Excess of revenue over expenses and disbursements	<74,571.				
	b Net investment income (d negative, enter -0-)		780,842			
	c Adjusted net income (if negative, enter -0-)		l <u> </u>	N/A	<u> </u>	

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2016)

Form	990-PF	(2016)
1 01111	33U-L L	(2010)

For	m 99	STORM CASTLE FOUNDATION 00-PF(2016) C/O SILVER LAKE		20	-8681172 Page 2
Б	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year		of year
	ai L	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	2,878,876.	2,743,894	. 2,743,894.
	2	Savings and temporary cash investments			
	3	Accounts receivable >	** ** ** * *** * * ***	2 West C	^ <u></u>
		Less: allowance for doubtful accounts			
	4	Pledges receivable	v. v	~~~~ ~~~ · ·	, sime we is deep
		Less: allowance for doubtful accounts			
	ı	Grants receivable		–	
	6	Receivables due from officers, directors, trustees, and other			
	١_	disqualified persons	- - -		
	7	Other notes and loans receivable	· · · · · · · · · · · · · · · · · · ·		6 32 22 22
	٦	Less; allowance for doubtful accounts	. - ·		-
Assets		Inventories for sale or use Prepaid expenses and deferred charges			
Ass		Investments - U.S. and state government obligations	· · · -		
	1	Investments - corporate stock STMT 8	3,148,200.	2,598,975	. 2,731,647.
	l	: Investments - corporate stock	3,210,2007	2700070.0	1 2//32/02/0
		Investments - land, buildings, and equipment basis	* * * * * * * * * * * * * * * * * * * *		v }
	l''	Less accumulated depreciation			adasa 🌣 sa a
	12	Investments - mortgage loans		·····	
	13	Investments - other STMT 9	2,645,034.	3,552,137	. 3,664,752.
	14	Land, buildings, and equipment; basis			
		Less accumulated depreciation			
	15	Other assets (describe ► STATEMENT 10)	247,572.	605	. 605.
	16	Total assets (to be completed by all filers - see the	0 010 600	0 005 644	0 140 000
_		ınstructions. Also, see page 1, item I)	8,919,682.	8,895,611	9,140,898.
		Accounts payable and accrued expenses		50,500	\exists^{*}
	18	Grants payable		30,300	
ties	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable			- ·
Ľ	1	Other liabilities (describe)	-		
		Otto Habilities (Booking)			-
	23	Total liabilities (add lines 17 through 22)	0.	50,500	• ′
		Foundations that follow SFAS 117, check here			1
	1	and complete lines 24 through 26 and lines 30 and 31.			* .
ces	24	Unrestricted			,
lan	25	Temporarily restricted			
Fund Balances	26	·			
Ĕ		Foundations that do not follow SFAS 117, check here			*
è	l	and complete lines 27 through 31.	0.	.) o	
ats (27		0.	. 0	
Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund Retained earnings, accumulated income, endowment, or other funds	8,919,682.	1	
Net /	29 30		8,919,682.		
Z	"	Total net assess of folio balances	0,323,0020	1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	4
_	31	Total liabilities and net assets/fund balances	8,919,682.	8,895,611	
F	art	III Analysis of Changes in Net Assets or Fund B	Balances		
1	Tota	al net assets or fund balances at beginning of year - Part II, column (a), line	30	<u> </u>	T
		ist agree with end-of-year figure reported on prior year's return)			8,919,682.
2	Ente	er amount from Part I, line 27a		. [2 <74,571.>

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	8,919,682.
2 Enter amount from Part I, line 27a	2	<74,57 1. >
3 Other increases not included in line 2 (itemize)	3	0.
4 Add lines 1, 2, and 3	4	8,845,111.
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	8,845,111.

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	nd Losses for	Tax on Investmen	t Income				0 000	II/Z rayes
				w acquired Purchase Donation	(c) Date a		(d) Date sold (mo., day, yr.)	
1a CAPITAL GAINS -	FROM DIF	FERENCES ON	STOCK	-	Condition			
b SALES				_	P			
c CAPITAL GAINS -	FROM K-	ls			P			
	REGULATED	FUTURES CON	TRACTS		P			
e UBS Y3 03041 -	CAPITAL G	AIN DISTRIBU	TIONS		P			
(e) Gross sales price	(f) Depreciation a (or allowable	, ,,,,	st or other basis expense of sale		_		aın or (loss) s (f) mınus (
<u>a</u>								
b 1,740,465.			1,061,64	5.				678,820.
c 106,016.								106,016.
d 7,236.								7,236.
e 94.								94.
Complete only for assets showing							ol. (h) gain	
(i) F.M.V. as of 12/31/69	(j) Adjusted ba as of 12/31/6		cess of col. (1)				not less thar (from col. (l	
a								<u> </u>
_b	 -							678,820.
_c								106,016.
_d								7,236.
_e					<u>.</u>			94.
2 Capital gain net income or (net cap		ıın, also enter ın Part I, line oss), enter -0- ın Part I, line		}	2			792,166.
3 Net short-term capital gain or (loss		•		ÍΓ				
If gain, also enter in Part I, line 8, c		is tele(o) and (o).		J				
If (loss), enter -0- in Part I, line 8	(0).			J.	3		N/A	
Part V Qualification Ur	der Section 49	40(e) for Reduced	Tax on Net	Inve	stment In	come		
If section 4940(d)(2) applies, leave thi Was the foundation liable for the secti If "Yes," the foundation does not qualif Enter the appropriate amount in ea	on 4942 tax on the dis y under section 4940(e). Do not complete this pa	art.					Yes X No
(a)	1	(b)	loro making any o	(c)				(d) oution ratio
Base periód years Calendar year (or tax year beginnin	g in) Adjusted o	qualifying distributions	Net value of no	ncharit			Distrib (col. (b) div	rided by col. (c))
2015		315,656.			000,94			.035069
2014		245,153.			688,71			.036652
2013		214,154.			766,75			.044927
2012		160,843.			615,42			.034849
2011		79,814.		3,	753,39	1.		.021265
2 Total of line 1, column (d)						2		.172762
3 Average distribution ratio for the 5 the foundation has been in existen	•	ride the total on line 2 by 5,	or by the number	of year	rs	. 3		.034552
4 Enter the net value of noncharitable	e-use assets for 2016	from Part X, line 5				4		9,181,854.
5 Multiply line 4 by line 3					5		317,251.	
6 Enter 1% of net investment income (1% of Part I, line 27b)				6		7,808.		
	v (170 OI I ait I, III I 27	U ,			•			
7 Add lines 5 and 6	-	•			٠	7		325,059.
8 Enter qualifying distributions from	Part XII, line 4					. 8	L	450,000.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box ii	n Part VI, line 1b, and com	plete that part usin	ıg a 1% 	tax rate.			
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STORM CASTLE FOUNDATION

Form 990-PF (2016) C/O SILVER LAKE		20-8683		Page 4
Part VI Excise Tax Based on Investment Income (Section 494		948 - see	instructio	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here and e	nter "N/A" on line 1.			
Date of ruling or determination letter: (attach copy of letter if nec	cessary-see instructions)	1 1		
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	➤ X and enter 1%	1	7,8	308.
of Part I, line 27b		(to \$9	\$ · / >>	** }
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	6 of Part I, line 12, col. (b).			erin (n. j.) Su Su Su Su J
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. O	thers enter -0-)	2		0.
3 Add lines 1 and 2	·	3	7,8	308.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. C	Others enter -O-)	4		0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	,	5	7,8	308.
6 Credits/Payments;		331	\$2. ° '\$;	<u> </u>
a 2016 estimated tax payments and 2015 overpayment credited to 2016	6a 1,595.			
b Exempt foreign organizations - tax withheld at source	6b			
c Tax paid with application for extension of time to file (Form 8868)	6c 12,000.	1 1 33		1
d Backup withholding erroneously withheld	6d	1 7	13. I	4
7 Total credits and payments. Add lines 6a through 6d		7 `` ''	13,5	ŠŠ.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	ached	8		69.
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	5.6	518.
11 Enter the amount of line 10 to be; Credited to 2017 estimated tax	5,618. Refunded	11		0.
Part VII-A Statements Regarding Activities	370201/1101011000		•	
1a During the tax year, did the foundation attempt to influence any national, state, or local legis	slation or did it participate or intervens		Yes	No
any political campaign?	station of the it participate of intervent	,	1a	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	sees (eas instructions for the definition	1/2	16	X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities a			- 	
	and copies of any materials publis	ned or		. 💸
distributed by the foundation in connection with the activities			1c	x
c Did the foundation file Form 1120-POL for this year?	n 1100		10	+
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the				સ્ટેપ્સ
(1) On the foundation. ► \$ (2) On foundation managers e Enter the reimbursement (if any) paid by the foundation during the year for political expend	' ' 	_		
• • • •	nure tax imposed on roundation			1
	inca		2	X
2 Has the foundation engaged in any activities that have not previously been reported to the I	ino!		1-	1.73
If "Yes," attach a detailed description of the activities.	unstrument estudies of specimenting			″ š
3 Has the foundation made any changes, not previously reported to the IRS, in its governing		Ui .	a	×χ
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change			4a	$+\frac{\Lambda}{X}$
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year	di?	N/A	4b	+
b If "Yes," has it filed a tax return on Form 990-T for this year?	2	H/A	5	+x
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year	•		"	+~
If "Yes," attach the statement required by General Instruction T.	outhors			
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied 6	einier.		. Y	d 45
By language in the governing instrument, or		to love	2.30	1
By state legislation that effectively amends the governing instrument so that no mandato	ory directions that conflict with the state	.e iaw	6 X	
remain in the governing instrument?				
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," co	implete Part II, col. (c), and Part X	V	7 X	┼
			` .×	
8a Enter the states to which the foundation reports or with which it is registered (see instruction	ons) -		. "	
CA	An 0 (- 4		.	
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	Attorney General (or designate)		, ' ;	-
of each state as required by General Instruction G? If "No," attach explanation			8b X	
9 Is the foundation claiming status as a private operating foundation within the meaning of s		endar		
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"			9	X
10 Did any persons become substantial contributors during the tax year? if "Yes," attach a sched	dule listing their names and addresses		10 D	X (2016)
		F	orm 990-Pi	- (2016)

STORM CASTLE FOUNDATION C/O SILVER LAKE 20-8681172 Page 5 Part VII-A Statements Regarding Activities (continued) Yes No 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of X section 512(b)(13)? If "Yes," attach schedule (see instructions) 11 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? 12 If "Yes," attach statement (see instructions) 13 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A 14 The books are in care of ► SILVER LAKE Telephone no. > 415 - 362 - 5990Located at ► 2775 SAND HILL ROAD, MENLO PARK, CA ZIP+4 ▶94025 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here N/A and enter the amount of tax-exempt interest received or accrued during the year **▶**] 15 Yes No 16 At any time during calendar year 2016, 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? 16 X See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required No File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. Yes 1a During the year did the foundation (either directly or indirectly): Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available Yes X No for the benefit or use of a disqualified person)? (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 Yes X No termination of government service, if terminating within 90 days.) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations N/A section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? 1b Organizations relying on a current notice regarding disaster assistance check here 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 Ŷ 1c before the first day of the tax year beginning in 2016? 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(i)(3) or 4942(i)(5)); a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? If "Yes," list the years 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 N/A 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. 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time Yes X No during the year? b If "Yes," did it have excess business holdings in 2016 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? (Use Schedule C, N/A Form 4720, to determine if the foundation had excess business holdings in 2016) 3b X 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a

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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 geopardy before the first day of the tax year beginning in 2016?

1 List all officers, directors, trustees, foundation managers and their	compensation.			
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deterred compensation	(e) Expense account, other allowances
	PRESIDENT			
C/O SILVER LAKE, 2775 SAND HILL ROAD,				í
MENLO PARK, CA 94025	1.00	0.	0.	0.
JAMES A. DAVIDSON	CFO/SECRETARY			
C/O SILVER LAKE, 2775 SAND HILL ROAD,				
MENLO PARK, CA 94025	1.00	0.	0.	0.
		<u> </u>		
		1		
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
	ì			
				
	1			
		(
		1		
	1	L		
Total number of other employees paid over \$50,000			▶	0

STORM CASTLE FOUNDATION

Form 990-PF (2016) C/O SILVER LAKE	20-868	1172 Page 7			
Part VIII Information About Officers, Directors, Trustees, Foundation Ma Paid Employees, and Contractors (continued)	nagers, Highly				
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					
		}			
	V-7 05 7 23				
		0			
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u> </u>			
<u></u>	tion augh so the				
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses			
1 THE FOUNDATION PLANS TO MAKE DONATIONS AND GRANTS					
CHARITABLE ORGANIZATIONS, INCLUDING SCIENTIFIC, EDUCATIONAL					
AND LITERARY ORGANZATIONS.		0.			
2					
	_				
3					
3					
4					
Part IX-B Summary of Program-Related Investments					
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and	2.	Amount			
1 N/A					
0		 			
All other program-related investments. See instructions.					
3					
Total. Add lines 1 through 3	<u>▶</u>	0.			

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P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	2,915,557.
	Average of monthly cash balances	1b	3,194,396.
C	Fair market value of all other assets	1c	3,211,726.
d	Total (add lines 1a, b, and c)	1d	9,321,679.
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	9,321,679.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	139,825.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	9,181,854.
6	Minimum investment return. Enter 5% of line 5	6	459,093.
Р	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	459,093.
2a	7 000	1	
b	Income tax for 2016, (This does not include the tax from Part VI.)	4	
C	Add lines 2a and 2b	2c	7,808.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	451,285.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	451,285.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	451,285.
P	art 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	450,000
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	450,000
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	7,808
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	442,192.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (qualifies fo	or the section

Part XIII Undistributed Income (s			20	-8681172
Distributable amount for 2016 from Part XI,	(a) Corpus	(b)		
line 7	oorpus	Years prior to 2015	(c)	
2 Undistributed income of		2013	2015	(d)
a Enter amount for 2015 only				2016
b Total for prior years:				
•				451,28
3 Excess distributions carryover, if any, to 2016:			419,235.	
a From 2011	``	_	-57255.	
b From 2012	1	0.		
c From 2013	. *	,		
d From 2014	15 / /		1	
e From 2015	* * '	,		
f Total (İ		
4 Qualifying distant	Strain Strain		1	·,
4 Qualifying distributions for 2016 from	ŏ.l	ľ		
	4 4			
a Applied to 2015, but not more than line 2a	3 / 35 /	—		`
b Applied to undistributed income of prior years (Election required)		. , , , , , , , , , , , , , , , , , , ,	, T	
years (Election required - see instructions)			410 00-	
c Treated as distributions out of corpus	2 1		419,235.	• .
(Election required - see instructions)		0.		3,0
	0.	4 / 4	3	
	× 15 15			,
5 Excess distributions carryover applied to 2016 must be shown in appears in column (d) the carryover applied to 2016	0.1			S CONTRACTOR
	0.	** ** ** ** **		30.765
citer the nattotal	\$ 100 mm			30,765.
indicated below:	· 1 · »	X N B	20 3	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				0.
	~ ð.l	- ₹	·	
line 4b from line 2b	<u> </u>		`	()
CENter the arm	1			* * * * * * * * * * * * * * * * * * * *
deficiency has a licentile for which a notice of		0.		
deficiency has been issued, or on which the section 4942(a) tay has been	1			
assessed " as been previously	1	1	-	· · · · · · · · · · · · · · · · · · ·
Subtract line 6c from line or -	1		1	
		0.		
Ondistributed income to an	1	·		
Aa from line 2a. Taxable amount - see instr.		0.		
Indistributed income to about - see instr.		<u> </u>		
nes 4d and 5 from line 1. T		1		
nes 4d and 5 from line 1. This amount must e distributed in 2017			0.	
mounts treated as divin	1	1		
		1	1	
ction 170(b)(1)(5) and the imposed by			1	
ction 170(b)(1)(F) or 4942(g)(3) (Election y be required - see rect.	1		4	20,520.
y be required - see instructions)	1	1	1	
also idulinne comus	0.		1	
applied on line 5 or line 7			1	
ess distributions carryover to 2017.	0.			
tract lines 7 and 8 from line 6a ysis of line 9:				
ss from 2012	0.			
s from 00 to				
s from 2013	1			
s from 2014	1	1		
s from 2015 from 2016	1	1	1	
110m 2016	1	I	1	
3-16	i	í	i	

STORM CASTLE FOUNDATION Form 990-PF (2016) C/O SILVER LAKE 20-8681172 Page 10 Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/Ã 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(1)(5) Prior 3 years 2 a Enter the lesser of the adjusted net Tax year (a) 2016 (b) 2015 (c) 2014 (d) 2013 (e) Total 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 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 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 foundation had \$5,000 or more in assets at any time during the year-see instructions.) 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).) SEE STATEMENT 11 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. SEE STATEMENT 12 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: 🔟 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: SEE STATEMENT 13 b The form in which applications should be submitted and information and materials they should include:

Form **990-PF** (2016)

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

c Any submission deadlines:

C/O SILVER LAKE

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3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
a Paid during the year			:	
AMERICAN CANCER SOCIETY 250 WILLIAMS ST NW ATLANTA , GA	NONE	NON PROFIT 501	HEALTH AND RESEARCH	50
BACK ON MY FEET 100 S BROAD STREET, SUITE 2016 PHILADELPHIA, PA 19110	NONE	NON PROFIT 501	COMMUNITY SUPPORT	1,00
BISHOP'S RANCH 5927 WESTSIDE RD HEALDSBURG, CA 95448	NONE	NON PROFIT 501	COMMUNITY SUPPORT	2,500
CA ACADEMY OF SCIENCES 55 MUSIC CONCOURSE DR., GOLDEN GATE PARK SAN FRANCISCO, CA 94118	NONE	NON PROFIT 501	EDUCATION	2,50
CRYSTAL SPRINGS UPLANDS SCHOOL 400 UPLANDS DRIVE HILLSBOROUGH, CA 94010	NONE	NON PROFIT 501	EDUCATION	47,50
	NTINUATION SHE	ET(S)	. ▶ 3a	450,00
NONE				
Total			> 3b	

Form 990-PF (2016) C/O SILVER LAK	E			20-8	681172 Page 12
Part XVI-A Analysis of Income-Produ	ıcing Activitie	s			
Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income		1 by section 512, 513, or 514	(e)
	(a) Business	(b)	Exclu- sion	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a					
b	- [
c					
d					
e					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments			7 7		
3 Interest on savings and temporary cash					
investments	1		14	333.	
4 Dividends and interest from securities			14	5,560.	
5 Net rental income or (loss) from real estate:	/	, h	, ,	, ,	N X W (W)
a Debt-financed property	 				
b Not debt-financed property	 		+		
6 Net rental income or (loss) from personal			+ +		
property	1 1		1 1		
7 Other investment income			01	<16,673.>	
8 Gain or (loss) from sales of assets other	 		+		
than inventory	1				<108,287.
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory	 				
11 Other revenue:	 		- -		
a IRS 2014 TAX REFUND	[[10,000.
b	- -		++		
•	-		+		
d	-				
e	-				
12 Subtotal. Add columns (b), (d), and (e)	- 7,		1.	<10,780.	<98,287.
13 Total. Add line 12, columns (b), (d), and (e)	L			13	<109,067.
(See worksheet in line 13 instructions to verify calculations.)					1203,007.
Part XVI-B Relationship of Activities	to the Accon	plishment of	Exempt	Purposes	
Line No. Explain below how each activity for which inc	come is reported in a	olumn (e) of Part XV	I-A contribut	ed importantly to the accomi	nlishment of
the foundation's exempt purposes (other tha				co importantly to the accomp	phoninont or
					 _
					
					
					
				· ··········	
	-	 			
					
					

Form **990-PF** (2016)

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the	organization directly or indir	rectly engage in any o	of the following	ng with any other orga	nızatıon	described in sect	tion 501(c) of		Yes	No
the Cod	ie (other than section 501(c)	(3) organizations) or	ın section 52	27, relating to political	organiza	ations?			,	
a Transfe	ers from the reporting founda	ation to a noncharitat	ole exempt or	ganization of:						
(1) Ca	sh .							1a(1)		X
(2) Oth	her assets							1a(2)		X
b Other tr	ransactions:									٠
(1) Sa	les of assets to a noncharital	ble exempt organizat	ion					1b(1)		X
(2) Pu	rchases of assets from a nor	ncharitable exempt o	rganization					1b(2)		X
	ntal of facilities, equipment,							1b(3)		X
	imbursement arrangements							1b(4)		X
	ans or loan guarantees							1b(5)		X
	rformance of services or me	•	-					1b(6)	L	X
_	g of facilities, equipment, ma	• ,						10	Ļ	Х
	nswer to any of the above is		_						ets,	
	ices given by the reporting for				et value	in any transaction	n or snaring arrangement, si	now in		
(a)Line no	(b) Amount involved			e exempt organization		(d) December				
(a)Line no	(b) Amount involved	(C) Name of	N/A	e exempt organization		(u) Descriptio	n of transfers, transactions, and s	snaring an	rangeme	ınıs
			N/A							
				 _		 				
+							 			
						 	 			
+		 				 -				
										
				 		 				
						 				
		 								
							· · · · · · · · · · · · · · · · · · ·			
			 -		-					
							- -			
2a Is the f	oundation directly or indirec	tly affiliated with, or r	elated to, one	e or more tax-exempt	organiza	tions described				
ın secti	ion 501(c) of the Code (other	r than section 501(c)	(3)) or in sec	tion 527?				☐ Yes	X	☐ No
b If Yes,	* complete the following sch									
	(a) Name of org	ganization		(b) Type of organiz	ation		(c) Description of relations	hip		
	N/A									
	·————									
				<u> </u>						
Luis	ider penalties of perjury, I declare	that I have examined the	o roturn unaludu	no accompanyana schadu	loe and et	tatements, and to the	n heat of my knowledge			
ا مما	d belief, it is true, correct, and cor						May	the IRS	discuss ne prepa	this rer
Sign Here		\mathbf{x}^{\prime}		11(1 8)	1917	PRESI	sho	wn below	(see ins	str)?
) J	Signature of officer or trustee	The state of			<u>U</u>	Trtle	DENI	Yes	. L_	_l No
	Print/Type preparer's na	ame	Preparer's s	Date	Ti	Date	Check if PTIN			
	T tille The bichaser 3 lie	41110	, iopaidi 3 s	Jighalaio	j'		self- employed			
Paid	KYLE VINEY	ARD	1 16/ 1	M (4 m	- 1	418117		0653	ี่ 81ก	1
Prepare			T.V.D			.007	Firm's EIN ▶ 94-3			
Use On				•			1		- •	
	Firm's address ▶ 50	CALIFORN	IA STR	REET, SUIT	E 35	550	 			
	•	N FRANCIS		-		=	Phone no. (415)	362	-59	90
					_			orm 99		

Part XV Supplementary Information 3 Grants and Contributions Paid During the				<u></u>
Recipient	If recipient is an individual,	F	2	
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
<u> </u>	or substantial contributor	recipient		
DARTMOUTH COLLEGE	NONE	NON PROFIT 501	POUCATION	
500 WEST KAGY BLVD	NONE	(C)(3)	EDUCATION	
HANOVER, NH 03755		1.0,(0)		37,500
EAGLE MOUNT BOZEMAN	NONE	NON PROFIT 501	RESEARCH	
6901 GOLDENSTEIN		(C)(3)		
BOZEMAN, MT 59715	<u> </u>	<u> </u>		5,000
EPISCOPAL CHARITIES	NONE	NON PROFIT 501	RELIGIOUS	
1055 TAYLOR STREET		(C)(3)		
SAN FRANCISCO, CA 94108		 		1,000
EXPLORATORIUM	NONE	NON PROFIT 501	EDUCATION	
15 PIER SAN FRANCISCO, CA 94111		(C)(3)		2,500
SAN FRANCISCO, CA 34111				2,300
FINE ARTS MUSEUM OF SAN FRANCISCO	NONE	NON PROPER 501	MEDICAL RESEARCH	
50 HAGIWARA TEA GARDEN DRIVE	MONE	(C)(3)	MEDICAL KESEAKCH	
SAN FRANCISCO, CA 94118				10,000
FOUNDATION FOR COLLEGE EDUCATION	NONE	NON PROFIT 501	EDUCATION	
2160 EUCLID AVE.		(C)(3)		
EAST PALO ALTO, CA 94303				2,500
				j
FOUNDATION FOR INDIVIDUAL RIGHTS	NONE		COMMUNITY SUPPORT	
510 WALNUT ST. SUITE 1250 PHILADELPHIA, PA 19106		(C)(3)		1,000
GALLATIN VALLEY LAND TRUST	NONE	NON PROFIT 501	COMMUNITY SUPPORT	
212 S WALLACE AVE, STE 102		(C)(3)		
BOZEMAN, MT 59715		 		5,000
HABITAT FOR HUMANITY	NONE	1	LOW INCOME SUPPORT	
645 HARRISON STREET		(C)(3)		115 000
SAN FRANCISCO, CA 94107		 	-	115,000
	VO.VT	NOW PROPER SOL	TOUGHT ON	
HARVARD LAW SCHOOL	NONE	NON PROFIT 501 (C)(3)	EDUCATION	1
1563 MASSACHUSETTS AVENUE CAMBRIDGE, MA 02138		(6,7,3)		50,000
Total from continuation sheets				396,000

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Recipient	If recipient is an individual,	1	I	
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Wallie and address (home of business)	or substantial contributor	recipient		
HILLSBOROUGH BEAUTIFICATION	NONE	NON PROFIT 501	ENVIRONMENTAL	
1600 FLORIBUNDA AVENUE		(C)(3)		
HILLSBOROUGH, CA 94010				1,000.
HILLSBOROUGH SCHOOLS FOUNDATION	NONE	NON PROFIT 501 (C)(3)	EDUCATION	
300 EL CERRITO AVENUE		(6)(3)		10,000.
HILLSBOROUGH, CA 94010				10,000.
INTERNATIONAL RESCUE	NONE	NON PROPER 501	COMMUNITY SUPPORT	
122 EAST 42ND STREET	NONE	(C)(3)	COMMONTIT BOTTOKI	
NEW YORK, NY 10168		(0),(0)		10,000.
JUMPSTART	NONE	NON PROFIT 501	EARLY EDUCATION	
308 CONGRESS STREET, 6TH FLOOR		(C)(3)		
BOSTON, MA 02210				5,000.
LIFE MOVES	NONE	NON PROFIT 501	COMMUNITY SUPPORT	
181 CONSTITUTION DRIVE		(C)(3)		
MENLO PARK, CA 95025				15,000.
MONTEREY BAY AQUARIUM	NONE	NON PROFIT 501	EDUCATION	
886 CANNERY ROW		(C)(3)		
MONTEREY, CA 93940				5,000.
MUSEUM OF THE ROCKIES	NONE	NON PROFIT 501	ARTS	
600 WEST KAGY BLVD		(C)(3)		
BOZEMAN, MT 59717				2,500.
NATIONAL MS SOCIETY	NONE		MEDICAL RESEARCH	
1700 OWENS STREET, STE 190		(C)(3)		1 500
SAN FRANCISCO, CA 94158				1,500.
DENTAGE A DELEGE	NOVE	NON PROPER 501	TOW THOOMS BRUCE TO	
PENINSULA BRIDGE 457 KINGSLEY AVE	NONE	(C)(3)	LOW INCOME EDUCATION ASSISTANCE	
PALO ALTO, CA 94301		(5/13/		5,000.
PENINSULA YOUTH ORCHESTRA	NONE	NON PROPER SOL	EDUCATION: MUSIC	
1091 INDUSTRIAL ROAD #208	NOME.	(C)(3)	EDUCATION, MUSIC	
SAN CARLOS, CA 94070				2,500.
Total from continuation sheets	<u> </u>	_•		

Part XV Supplementary Information 3 Grants and Contributions Paid During the Y				<u> </u>
. 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	
QUESTBRIDGE 445 SHERMAN AVE, SUITE 100 PALO ALTO, CA 94306	NONE	NON PROFIT 501	EDUCATION	5,000
SAN FRANCISCO BALLET 301 VAN NESS AVENUE SAN FRANCISCO, CA 94102	NONE	NON PROFIT 501	ARTS	5,000
SAN FRANCISCO MUSEUM OF MODERN ART 151 3RD STREET SAN FRANCISCO, CA 94103	NONE	NON PROFIT 501	ARTS	10,000
SAN FRANCISCO SYMPHONY 201 VAN NESS AVENUE SAN FRANCISCO, CA 94102	NONE	NON PROFIT 501	ARTS AND MUSIC	10,000
SAN MATEO HISTORIAL ASSOCIATION 2200 BROADWAY REDWOOD CITY , CA 94063	NONE	NON PROFIT 501	EDUCATION: HISTORY	500
SAVE THE BAY 1330 BROADWAY, SUITE 1800 OAKLAND, CA 94612	NONE	NON PROFIT 501	ENVIRONMENTAL	2,500
SECOND HARVEST FOOD BANK 750 CURTNER AVENUE SAN JOSE, CA 95125	NONE	NON PROFIT 501	COMMUNITY SUPPORT	10,000
ST.PAULS EPISCOPAL CHURCH 114 MONTECITO AVE OAKLAND, CA 94610	NONE	NON PROFIT 501	RELIGIOUS	2,500
STANFORD UNIVERSITY (STANFORD LIVE) 450 SERRA MALL STANFORD, CA 94305	NONE	NON PROFIT 501	EDUCATION	10,000
SUN VALEY CTR FOR THE ARTS P.O 656 SUN VALLEY, ID 83353	NONE	NON PROFIT 501	ARTS AND MUSIC	5,000

Part XV Supplementary Information		·		1
3 Grants and Contributions Paid During the				
, 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		
TEACH FOR AMERICA	NONE	NON PROFIT 501	EDUCATION	
315 WEST 36TH STREET, 7TH FLOOR		(C)(3)		
NEW YORK, NY 10018				10,000
		VOV. DDODTE CA1		
THE JIMMY FUND	NONE	(C)(3)	MEDICAL RESEARCH	
10 BROOKLINE PLACE WEST, 6TH FLOOR		(C)(3)		500
BROOKLINE, MA 02445	-	 		300
THE SMITHSONIAN INSTITUTION	NONE	NON PROPIT 501	EDUCATION	
750 9TH ST		(C)(3)		
WASHINGTON, DC 20004				10,000
UC DAVIS	NONE	NON PROFIT 501	EDUCATION	
ONE SHIELDS AVENUE		(C)(3)		
DAVIS, CA 95616		ļ ————————————————————————————————————		5,000
		VOV. PROPER FOI		
YALE YOUNG GLOBAL SCHOLARS PROGRAM 393 PROSPECT STREET	NONE	NON PROFIT 501 (C)(3)	EDUCATION	
NEW HAVEN, CT 06511		(6/(3/		15,000
YC COMMUNITY FOUNDATION	NONE	NON PROFIT 501	COMMUNITY SUPPORT	
1111 RESEARCH DRIVE, UNIT B		(C)(3)]	
BOZEMAN, MT 59718				5,000
YOUTH ON COURSE	NONE	NON PROFIT 501	EDUCATION	
3200 LOPEZ ROAD PEBBLE BEACH, CA 93953		(C)(3)		3,000
	1	 	-	
		 		
Total from continuation sheets		<u> </u>	<u> </u>	ļ
LOTAL HOM CONTUINATION SUCCES			<u> </u>	1

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

Name of the organization STORM CASTLE FOUNDATION

C/O SILVER LAKE

Employer identification number

20-8681172

Organiza	ition type (check or	ne).
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
Note: Or General	lly a section 501(c)(Rule For an organization	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. I filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special		
	sections 509(a)(1) a any one contributo	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 r, 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, line 1 Complete Parts I and II.
	year, total contribu	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for ruelty to children or animals. Complete Parts I, II, and III
	year, contributions is checked, enter h purpose. Don't cor	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box here the total contributions that were received during the year for an exclusively religious, charitable, etc., implete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year
but it mi	ıst answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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 he filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

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Name of organization STORM CASTLE FOUNDATION
C/O SILVER LAKE Employer identification number

20-8681172

		7-0001172
Contributors (See instructions). Use duplicate copies of Part I if	additional space is needed.	
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
JIM & JULIA DAVIDSON 2775 SAND HILL ROAD SUITE 100 MENLO PARK, CA 94025	\$\$\$	Person Payroll Noncash X (Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	 \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	 \$ 	Person Payroll Noncash (Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	\$	Person Payroll Occash (Complete Part II for noncash contributions.)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
	Contributors (See instructions). Use duplicate copies of Part I if (b) Name, address, and ZIP + 4 JIM & JULIA DAVIDSON 2775 SAND HILL ROAD SUITE 100 MENLO PARK, CA 94025 (b) Name, address, and ZIP + 4 Contributors (See instructions). Use duplicate copies of Part I if additional space is needed. (b) (c) Total contributions JIM & JULIA DAVIDSON 2775 SAND HILL ROAD SUITE 100 \$ 500,900. MENLO PARK, CA 94025 (b) Name, address, and ZIP + 4 (c) Total contributions \$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2016) Name of organization STORM CASTLE FOUNDATION C/O SILVER LAKE

Employer identification number

20-8681172

(a) No. from Description of noncash property given 1 GLOBANT SA: \$500,900 (b) FMV (or estimate) (See instructions) \$ 500,900. 12/19/16 (a) No. from Description of noncash property given (b) FMV (or estimate) (See instructions) (b) FMV (or estimate) (See instructions)	Part II	Noncash Property (See instructions). Use duplicate copies of Par		-8681172
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No. (b) (c) (d) FMV (or estimate) (d) Date received Part I			<u> </u>	
from Description of noncash property given (See instructions) Date received		/L1	(c)	(A)
	from			
			 	

623453 10-18-16

FORM 99	0-PF G	AIN OR (LOSS) I	FROM SALE	OF A	ASSETS	STA	TEMENT 1
DESCRIP	(A) TION OF PROPERTY	•			MANNER CQUIRED	DATE ACQUIRED	DATE SOLD
CAPITAL SALES	GAINS - FROM DI	FFERENCES ON ST	FOCK	PU	RCHASED		
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	C. GAIN	(F) OR LOSS
•	1,740,465.	1,962,098.		0.		0.	<221,633.
	(A) TION OF PROPERTY GAINS - FROM R			_A	MANNER CQUIRED ———— RCHASED	DATE ACQUIRED	DATE SOLD
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E)	C. GAIN	(F)
•	106,016.	0.		0.		0.	106,016.
DESCRIP	(A) TION OF PROPERTY	7			MANNER CQUIRED	DATE ACQUIRED	DATE SOLD
UBS Y3	03041 - REGULATE	ED FUTURES CONTI	RACTS	PU	RCHASED		
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	C. GAIN	(F) I OR LOSS
•	7,236.	0.		0.		0.	7,236.

. (A) DESCRIPTION OF PROD	PERTY				MANN ACQUI		DA'		DATE SO)LD
UBS Y3 03041 - CAP	TAL GAIN DIS	STRIBUTI	ONS		PURCHA	SED				
(B) GROSS SALES PRIC		OR	(I EXPEN SA			(E) EPRE	C.	GAI	(F) N OR LOSS	5
	94.	0.			0.		0.		9	4.
CAPITAL GAINS DIVI	DENDS FROM PA	ART IV								0.
TOTAL TO FORM 990-1	PF, PART I, I	LINE 6A					:		<108,28	 7.>
FORM 990-PF INTER	EST ON SAVING	GS AND T	rempor <i>i</i>	ARY (CASH IN	IVESTI	MENTS	ST.	ATEMENT	2
SOURCE			(A) EVENUE R BOOKS		NET IN	(B) IVESTI ICOME	MENT		(C) ADJUSTED ET INCOME	2
UBS # Y3 03041 04			33	33.			333.			
TOTAL TO PART I, L	INE 3		33	33.			333.			
FORM 990-PF	DIVIDENDS	AND IN	rerest	FRO	M SECUE	RITIE	S	ST	ATEMENT	3
SOURCE	GROSS AMOUNT	CAPIT GAII DIVIDI		RE	(A) VENUE BOOKS		(B) INVE T INC		(C) ADJUSTI NET INCO	
UBS # Y3 03041 04 UBS # Y3 03041 04	5,382. 178.		0.		5,382		5,3 1	82. 78.		
TO PART I, LINE 4	5,560.		0.		5,560		5,5	60.		

FORM 990-PF	OTHER	INCOME		STATEMENT	4
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTE NET INCO	
MAKENA	_	14,398.	14,398	•	
SILVER LAKE FINANCIAL		0.	0.		
AG INVESTORS LLC		<8,759.	> <8,759	•>	
LIGHT STREET HALOGEN		<33,356.			
SILVER LAKE WATERMAN		70,838.			
SIVLER LAKE WATERMAN FUND II		<9,237.			
H BARTON VENTURE SELECT II		<16,622.			
SUNOCO		<33,935.			
IRS 2014 TAX REFUND		10,000.	0.	•	
TOTAL TO FORM 990-PF, PART I,	LINE 11 =	<6,673.	> <16,673	.> = ==========	
FORM 990-PF	ACCOUNT	ING FEES		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
ACCOUNTING	3,700	0.	•		0.
TO FORM 990-PF, PG 1, LN 16B	3,700	0	•		0.
FORM 990-PF	T/	AXES	=======================================	STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITA E PURPOS	
TAXES - FTB	10	0.			0.
TAXES - IRS	12,000				0.
TO FORM 990-PF, PG 1, LN 18	12,010	0.	•		0.

FORM 990-PF	OTHER E	XPENSES			STATEMENT	7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		ABLE
ADR FEE STATE REGISTRATION FEE	544. 150.		5 44. 0.			0.
TO FORM 990-PF, PG 1, LN 23	694.	· 	544.			0.
FORM 990-PF	CORPORAT	E STOCK			STATEMENT	' 8
DESCRIPTION			вос	OK VALUE	FAIR MARK VALUE	ŒT
AMAZON ALIBABA INVESCO			1	206,230. ,796,275. 3,582.	1,741,	931.
IVY ASSET STRATEGY UNDER ARMOUR VANGUARD DIV APP GLOBANT				0. 29,812. 62,176. 500,900.	67,	0. 119. 548. 582.
TOTAL TO FORM 990-PF, PART II	, LINE 10B			2,598,975.	2,731,	647.
FORM 990-PF	OTHER INV	ESTMENTS			STATEMENT	. 9
DESCRIPTION		LUATION ETHOD	вос	OK VALUE	FAIR MARF VALUE	KET
AG INVESTORS LIGHT STREET HALOGEN LP MAKENA CAPITAL SPLITTER X, LP SILVER LAKE FINANCIAL ASSOCIA SILVER LAKE WATERMAN FUND SILVER LAKE WATERMAN FUND II H BARTON ENERGY TRANSFER PARTNERS		COST COST COST COST COST COST COST	1	209,015. 575,901. 1,251,698. 1,478. 431,340. 114,139. 279,131. 689,435.	845, 1,093, 420, 10, 305,	588. 928. 253. 0. 529. 938. 796.
TOTAL TO FORM 990-PF, PART II	, LINE 13			3,552,137.	3,664	752.

FORM 990-PF	OTHER ASSETS		STATEMENT	10
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE	
PROCEEDS RECEIVABLE - UNSETTLED TRANSACTIONS DIVIDEND RECEIVABLE	247,572.	0. 605.	6	0.
TO FORM 990-PF, PART II, LINE 15	247,572.	605.	6	05.
	XV - LINE 1A		STATEMENT	11

NAME OF MANAGER

JULIA LOEWY DAVIDSON JAMES A. DAVIDSON

			
FORM 990-PF	PART XV - LINE 1B	STATEMENT	12
LIST	OF FOUNDATION MANAGERS		

NAME OF MANAGER

JULIA LOEWY DAVIDSON JAMES A. DAVIDSON

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION STATEMENT 13 PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

JULIA LOEWY DAVIDSON 2775 SAND HILL ROAD, SUITE 100 MENLO PARK, CA 94025

TELEPHONE NUMBER

650-233-8120

FORM AND CONTENT OF APPLICATIONS

THE APPLICATION SHOULD BE IN WRITTEN FORM AND SENT TO THE FOUNDATION. THE MATERIALS SHOULD STATE THE OBJECTIVE OF THE ORGANIZATION, AMOUNT REQUESTED, AND THE PRINCIPAL MANAGERS OF THE ORGANIZATION.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

NONE