



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF**
 Department of the Treasury
 Internal Revenue Service

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 instructions is at www.irs.gov/form990pf.

OMB No 1545-0052
2016
Open to Public Inspection

For calendar year 2016, or tax year beginning 01-01-2016 , and ending 12-31-2016

Name of foundation SOCIUS FOUNDATION		A Employer identification number 46-3951294	
Number and street (or P O box number if mail is not delivered to street address) Room/suite 301 HOWARD STREET STE 1030		B Telephone number (see instructions) (415) 456-4000	
City or town, state or province, country, and ZIP or foreign postal code SAN FRANCISCO, CA 94105		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 169,480		J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	
		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

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))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	142,753			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)			0	
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)	24,372		0		
12 Total. Add lines 1 through 11	167,125		0		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0		0	
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)	231		0	
	b Accounting fees (attach schedule)	4,085		0	
	c Other professional fees (attach schedule)				
	17 Interest	3		0	
	18 Taxes (attach schedule) (see instructions)				
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	11,708		0	
	24 Total operating and administrative expenses. Add lines 13 through 23	16,027		0	
	25 Contributions, gifts, grants paid	131,100			131,100
26 Total expenses and disbursements. Add lines 24 and 25	147,127		0	131,100	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	19,998				
b Net investment income (if negative, enter -0-)			0		
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	132,472	159,480	159,480
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶ <u>10,000</u>			
	Less allowance for doubtful accounts ▶ _____		10,000	10,000
	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			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ _____			
Less accumulated depreciation (attach schedule) ▶ _____				
12 Investments—mortgage loans				
13 Investments—other (attach schedule)				
14 Land, buildings, and equipment basis ▶ _____				
Less accumulated depreciation (attach schedule) ▶ _____				
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	132,472	169,480	169,480	
Liabilities	17 Accounts payable and accrued expenses	113,025	130,035	
	18 Grants payable			
	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 ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	113,025	130,035	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> 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 ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	19,447	39,445	
	28 Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
29 Retained earnings, accumulated income, endowment, or other funds	0	0		
30 Total net assets or fund balances (see instructions)	19,447	39,445		
31 Total liabilities and net assets/fund balances (see instructions) .	132,472	169,480		

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	19,447
2 Enter amount from Part I, line 27a	2	19,998
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3	4	39,445
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	39,445

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
1a				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		
a				
b				
c				
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
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	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7		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))
2015	124,000	22,572	5 493532
2014	2,500	513	4 873294
2013	0	0	0 000000
2012			
2011			
2 Total of line 1, column (d)			2 10 366826
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 3 455609
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5			4 5,437
5 Multiply line 4 by line 3			5 18,788
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 0
7 Add lines 5 and 6			7 18,788
8 Enter qualifying distributions from Part XII, line 4			8 131,100

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 instructions)

Table with 11 rows for excise tax calculations. Includes questions about exempt foundations, tax under section 511, and tax due/overpayment. Includes sub-tables 6a-6d for credits.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions about political campaigns, political expenditures, and state reporting requirements. Includes Yes/No columns.

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-13 regarding controlled entities, donor advised funds, and public inspection requirements.

14 The books are in care of DAN SEBASTIANI Telephone no (925) 295-2512

Located at 1350 CARLBACK AVENUE STE 350 WALNUT CREEK CA ZIP+4 94596

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 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? 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

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.

Main table with 3 columns: Question, Yes, No. Rows 1a-4b regarding Form 4720 exceptions and requirements.

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)? Yes No
 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? Yes 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? Yes No

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	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				

Total number of other employees paid over \$50,000. 0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

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		
Total. Add lines 1 through 3 ▶		0

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	0
b	Average of monthly cash balances.	1b	5,520
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	5,520
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	5,520
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	83
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	5,437
6	Minimum investment return. Enter 5% of line 5.	6	272

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	272
2a	Tax on investment income for 2016 from Part VI, line 5.	2a	
b	Income tax for 2016 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	272
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	272
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	272

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	131,100
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	131,100
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	131,100

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 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				272
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only.			0	
b Total for prior years 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2016				
a From 2011.				
b From 2012.				
c From 2013.				
d From 2014.			2,474	
e From 2015.			122,871	
f Total of lines 3a through e.	125,345			
4 Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ <u>131,100</u>				
a Applied to 2015, 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 2016 distributable amount.				272
e Remaining amount distributed out of corpus	130,828			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))				0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	256,173			
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 2015 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 2017				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 2011 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	256,173			
10 Analysis of line 9				
a Excess from 2012.				
b Excess from 2013.				
c Excess from 2014.			2,474	
d Excess from 2015.			122,871	
e Excess from 2016.			130,828	

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a 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 organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
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

PATRICK E HANLEY
 2929 CLAY STREET
 SAN FRANCISCO, CA 94115
 (415) 456-4000
 PHANLEY@SOCIOUSFOUNDATION.ORG

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

ELECTRONICALLY, CONTACT DIRECTOR

c Any submission deadlines

VARIOUS

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

\$2500-\$9999

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				131,100
b <i>Approved for future payment</i>				
Total ▶ 3b				0

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-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
PATRICK E HANLEY SR 301 HOWARD STREET STE1030 SAN FRANCISCO, CA 94105	PRESIDENT 1 00	0	0	0
F MICHAEL HEFFERNAN 1350 CARLBACK AVENUE WALNUT CREEK, CA 94596	DIRECTOR 1 00	0	0	0
GREG BUONOCORE 301 HOWARD STREET STE1030 SAN FRANCISCO, CA 94105	DIRECTOR 1 00	0	0	0
STEVE DYSON 301 HOWARD STREET STE1030 SAN FRANCISCO, CA 94105	DIRECTOR 1 00	0	0	0
SCOTT CULLER 301 HOWARD STREET STE1030 SAN FRANCISCO, CA 94105	DIRECTOR 1 00	0	0	0


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>				
ACCESSED FOUNDATION 2436 SACRAMENTO ST SUITE 100 BERKELEY, CA 94702		NC	2016 GRANTS	2,000
AFTER SCHOOL ALL STARS 1331 H STREET NW SUITE 1100 WASHINGTON, DC 20005		NC	2016 GRANTS	1,500
ALPHA PREGNANCY CENTER 5070 MISSION STREET SAN FRANCISCO, CA 94105		NC	2016 GRANTS	500
ALPHA PREGNANCY CENTER 5070 MISSION STREET SAN FRANCISCO, CA 94112		NC	MATCHING DONATION-CHARLES GARCIA	100
BATON ROUGE FOUNDATION 100 NORTH STREET SUITE 900 BATON ROUGE, LA 70806		NC	MATCHING DONATION-CHARLES GARCIA	250
Total 3a	▶			131,100

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>				
BAY AREA GERMAN SHEPHERD RESCUE PO BOX 2846 NOVATO, CA 94948		NC	2016 GRANTS	2,000
BESS THE BOOK BUS INC 301 NATIONAL ORANGE AVE ODLSMAR, FL 346773905		NC	2016 PLUS 3 DONATION	2,500
BEST BUDDIES TAMPA BAY 200 SOUTH HOOVER BLVD SUITE 191 TAMPA, FL 33609		NC	2016 GRANTS	3,000
CAMPAIGN FOR THE ARTS 601 NE 107 STREET MIAMI, FL 33161		NC	2016 GRANTS	5,000
CHALLENGE DAY 2520 STANDWELL DRIVE SUITE 160 CONCORD, CA 94520		NC	2016 GRANTS	3,000
Total ▶ 3a				131,100

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>				
COASTAL CONSERVATION ASSOCIATION FLORIDA PO BOX 568886 ORLANDO, FL 32856		NC	2016 GRANTS	3,000
COMMUNITY FOODBANK OF CENTRAL ALABAMA 107 WALTER DAVIS DRIVE BIRMINGHAM, AL 35029		NC	2016 GRANTS	3,000
CYSTIC FIBROSIS FOUNDATION 5100 W KENNEDY BLVD SUITE 195 TAMPA, FL 33609		NC	2016 GRANTS	2,000
DORIS A HOWELL FOUNDATION FOR WOMEN'S HEALTH RESEARCH PMB 320 7514 GIRARD AVE 1 LA JOLLA, CA 92037		NC	2016 GRANTS	4,000
DOWNTOWN WOMEN'S CENTER 442 SAN PEDRO STREETS LOS ANGELES, CA 90013		NC	2016 GRANTS	4,000
Total 				131,100
3a				

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>				
ECKERED RAISING HOPE 100 NORTH STARCREST DRIVE CLEARWATER, FL 33765		NC	2016 GRANTS	2,000
EVANS SCHOLARS FOUNDATION ONE BRIAR ROAD GOLF, IL 60029		NC	DONATION ON BEHALF OF HANK STICKLEY	250
FIRST CHAPTER PO BOX 3952 OAKLAND, CA 94609		NC	2016 GRANTS	2,000
FRIEND OF JOSHUA HOUSE FOUNDATION PO BOX 26333 TAMPA, FL 33623		NC	2016 GRANTS	2,500
GATEWAY COMMUNITY SERVICES 555 STOCKTON ST JACKSONVILLE, FL 32204		NC	2016 GRANTS	3,000
Total ▶ 3a				131,100

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>				
GULF COAST JEWISH FAMILY AND COMMUNITY SERVICES 14041 ICOT BLVD CLEARWATER, FL 33760				
		NC	2016 GRANTS	3,000
HEART OF FLORIDA UNITED WAY DR NELSON YING CENTER 1940 TRAYLOR BLVD ORLANDO, FL 32804				
		NC	2016 GRANTS	3,000
HIGH RISK HOPE 1702 N AVENIDA REPUBLICA DE CUBA TAMPA, FL 33605				
		NC	2016 GRANTS	3,000
HOMELESS SERVICE CENTER - SANTA CRUZ 115B CORAL ST SANTA CRUZ, CA 95060				
		NC	2016 GRANTS	3,000
HOSPICE NET INC 401 BOWLING AVE SUITE 51 NASHVILLE, TN 372055124				
		NC	2016 GRANTS	2,000
Total ▶ 3a				131,100

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>				
IPAS PO BOX 9990 CHAPEL HILL, NC 27514			NC MATCHING DONATION-MICHAEL HOY	125
JDRF SOUTH FLOIDA CHAPTER 3411 NW 9TH AVENUE SUITE 701 FORT LAUDERDALE, FL 33309			NC 2016 GRANTS	4,000
LIFT ORLANDO 215 EAST CENTRAL BLVD ORLANDO, FL 32801			NC 2016 GRANTS	3,000
OPENDOOR HEALTH CENTER OF ILLINOIS 157 S LINCOLN AVE SUITE K AURORA, IL 60605			NC 2016 GRANTS	4,000
PARC CHILDREN SERVICES 3190 TYRONE BLVD NORTH ST PETERSBURG, FL 33710			NC 2016 GRANTS	3,000
Total ▶ 3a				131,100

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>				
PROJECT HOMELESS CONNECT 25 VAN NESS AVE SUITE 340 SAN FRANCISCO, CA 94102		NC	2016 GRANTS	2,500
SENIORS FIRST INC 5395 LB MCLEOD ROAD ORLANDO, FL 32811		NC	2016 GRANTS	3,000
SHELTER INC OF CONTRA COSTA COUNTY 1333 WILLOW PASS ROAD SUITE 206 CONCORD, CA 94520		NC	2016 GRANTS	3,000
SHEPHERD OF HOPE 4851 S APOPKA-VINELAND ROAD ORLANDO, FL 32819		NC	2016 GRANTS	3,000
SPARKS 101A CLAY ST 188 SAN FRANCISCO, CA 94109		NC	2016 GRANTS	1,800
Total ▶ 3a				131,100

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>				
SPARKS 101A CLAY ST 188 SAN FRANCISCO, CA 94109		NC	2016 PLUS 3 DONATION	2,500
ST BEDE CATHOLIC SCHOOL AND CHURCH 26910 PATRICK AVE HAYWARD, CA 94544		NC	2016 PLUS 3 DONATION	2,500
ST VINCENT DE PAUL SOUTH PINELLAS INC 384 15TH N ST PETERSBURG, FL 337052016		NC	2016 GRANTS	2,000
STERNE SCHOOL 2690 JACKSON STREET SAN FRANCISCO, CA 94115		NC	2016 GRANTS	4,000
THE ALS ASSOCIATION GOLDEN WEST CHAPTER PO BOX 565 AGOURA HILLS, CA 913760506		NC	2016 GRANTS	3,000
Total 3a				131,100

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>				
THE ARTS OF LIFE 2010 W CARROLL AVE CHICAGO, IL 60612		NC	2016 GRANTS	3,200
THE CHILDREN'S CANCER CENTER 4901 WEST CYPRESS STREET TAMPA, FL 33607		NC	2016 GRANTS	3,000
THE FRIENDS OF ISRAEL GOSPEL MINISTRY INC P O BOX 908 BELLMAWR, NJ 080990908		NC	MATCHING DONATION-CHARLES GARCIA	100
THE LEUKEMIA & LYMPHOMA SOCIETY 101 MONTGOMERY ST SUITE 750 SAN FRANCISCO, CA 94104		NC	2016 PLUS 3 DONATION	2,500
THE MAVEN PROJECT 3838 CALIFORNIA STREET SUITE 316 SAN FRANCISCO, CA 94118		NC	2016 GRANTS	3,000
Total 3a				131,100

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>				
THE ROCK CHURCH 273 MONTE VISTA RD CANDLER, NC 28715		NC	MATCHING DONATION-CYNTHIA ZIMMERMAN	100
THE RUTHERFORD INSTITUTE P O BOX 7482 CHARLOTTESVILLE, VA 22906		NC	MATCHING DONATION-CHARLES GARCIA	50
THE SPRING OF TAMPA BAY PO BOX 5147 TAMPA, FL 33675		NC	2016 GRANTS	3,000
THREE SQUARE FOOD BANK 4190 N PECOS RD LAS VEGAS, NV 89115		NC	2016 GRANTS	3,500
TRINITY UNIVERSITY ONE TRINITYPLACE SAN ANTONIO, TX 78212		NC	2016 GRANTS	4,500
Total ▶ 3a				131,100

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>				
UCP OF CENTRAL FLORIDA 3305 S ORANGE AVENUE ORLANDO, FL 32806		NC	2016 GRANTS	4,000
YOUTH CHALLENGE 800 SHARON DRIVE WESTLAKE, OH 44145		NC	MATCHING DONATION-MICHAEL HOY	125
YWCA OF SAN DIEGO COUNTY 1012 C ST SAN DIEGO, CA 921015522		NC	2016 GRANTS	3,000
Total ▶ 3a				131,100

TY 2016 Accounting Fees Schedule**Name:** SOCIUS FOUNDATION**EIN:** 46-3951294

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	4,085	0		0

TY 2016 Legal Fees Schedule**Name:** SOCIUS FOUNDATION**EIN:** 46-3951294

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL	231	0		0

TY 2016 Other Expenses Schedule**Name:** SOCIUS FOUNDATION**EIN:** 46-3951294**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK FEES	878	0		0
FUNDRAISING EXPENSE	10,627	0		0
OTHER TAXES AND FEES	200	0		0
OFFICE EXPENSE	3	0		0

TY 2016 Other Income Schedule**Name:** SOCIUS FOUNDATION**EIN:** 46-3951294**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
GROSS INCOME FROM SPECIAL FUNDRAISING EVENTS	24,372		24,372

**TY 2016 Substantial Contributors
Schedule****Name:** SOCIUS FOUNDATION**EIN:** 46-3951294**Name****Address**

PATRICK HANLEY

2929 CLAY STREET
SAN FRANCISCO, CA 94115

HEFFERNAN FOUNDATION

1350 CARLBACK AVENUE
WALNUT CREEK, CA 94596

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
2016

Name of the organization
SOCIUS FOUNDATION

Employer identification number
46-3951294

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

Form 990-PF

- 527 political organization
- 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
SOCIUS FOUNDATION

Employer identification number
46-3951294

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	PATRICK E HANLEY _____ 2929 CLAY STREET _____ SAN FRANCISCO, CA941151712	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
2	HEFERNAN FOUNDATION _____ 1350 CARLBACK AVENUE _____ WALNUT CREEK, CA94596	\$ 80,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
3	HEFERNAN FOUNDATION _____ 1350 CARLBACK AVENUE _____ WALNUT CREEK, CA94596	\$ 28,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization SOCIUS FOUNDATION	Employer identification number 46-3951294
--------------------------------------------------	-----------------------------------------------------

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____
 Use duplicate copies of Part III if additional space is needed

(a) No. from 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
_____	_____
_____	_____

(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
_____	_____
_____	_____

(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
_____	_____
_____	_____

(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
_____	_____
_____	_____