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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

A F	or the	2016 calendar year, or tax year beginning and	ending		
Во	heck if	C Name of organization		D Employer identifica	tion number
	oplicable	BULLIS-PURISSIMA ELEMENTARY SCHOOL			
	Address change	FOUNDATION			
<u>_</u>	Name  change	Doing business as	-	48-12	98690
	Initial return	, , , , , , , , , , , , , , , , , , , ,	Room/suite	E Telephone number	
L	Final return/	102 W. PORTOLA AVENUE			87-1397
_	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	<u>5,509,276.</u>
$\vdash$	Amende Jreturn	LOS ALTOS, CA 94022		H(a) Is this a group retu	
	Applica- tion pending	F Name and address of principal officer. CHRIS WELLBORN	_	for subordinates?	Yes X No
		102 W PORTOLA AVE, LOS ALTOS, CA 94022		H(b) Are all subordinates inclu	
_		mpt status: X 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) c	or 527	1 ' '	t. (see instructions)
		HTTP://WWW.BCSFOUNDATION.COM/		H(c) Group exemption I	
		organization: X Corporation Trust Association Other	L Year	of formation: 2003 M S	State of legal domicile: CA
Pa		Summary			
ĕ		Briefly describe the organization's mission or most significant activities: THE 1		TION'S MISSI	ON IS TO
Activities & Governance	_	PROVIDE FINANCIAL SUPPORT TO PUBLIC EDUCA			
ern		Check this box 🕨 🔛 if the organization discontinued its operations or dispos	sed of more	than 25% of its net asse	
Š		Number of voting members of the governing body (Part VI, line 1a)		3	<u>21</u>
જ		Number of independent voting members of the governing body (Part VI, line 1b)		4	21
ies		otal number of individuals employed in calendar year 2016 (Part V, line 2a)		5	0
Ξ		otal number of volunteers (estimate if necessary)		6	22
Aci	7a⊺	otal unrelated business revenue from Part VIII, column (C), line 12CEIVEL	}	<u>7a</u>	0.
	<u> b                                   </u>		3	7b	0.
		Contributions and grants (Part VIII, line 1h)  Program pension revenue (Part VIII, line 2a)	၁	Prior Year	Current Year
ne	l	Contributions and grants (Part VIII, line 1h)	၂႘⊩	3,362,104.	3,726,928.
/en	9 F			0.	0.
rǽ.	10 1	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		113,811.	249,449.
2018 evenue	'' (	other revenue (Part VIII, Column (A), lines 5, 60, 60, 90, autogation and	-	287,060.	289,680.
<u>7</u> 9		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,762,975.	4,266,057.
0	l	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	-	3,596,292.	3,391,903.
	Į.	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
Ses S		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
Expenses	i	Professional fundraising fees (Part IX, column (A), line 11e)	<b>-</b> 22	<u>U.</u>	0.
꿃	l	Total fundraising expenses (Part IX, column (D), line 25) 7, 3:	<del></del>	150,694.	71 000
Ž	17 (	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	}	3,746,986.	71,990. 3,463,893.
Ξ,	18 1	Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	-	15,989.	
Net Assets or ANN Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12			802,164.
alst	00 7	Fatal assats (Dart V. Las 10)	Бе	ginning of Current Year 5,550,945.	End of Year 6,324,407.
ASS Bal	20 1	Fotal assets (Part X, line 16)	-	12,606.	12,606.
Set	21 7	Fotal liabilities (Part X, line 26)  Net assets or fund balances. Subtract line 21 from line 20	-	5,538,339.	6,311,801.
	rt II	Signature Block		<u> </u>	0,311,001.
_		ties of perjury, I declare that I have examined this return, including accompanying schedule	s and statem	ents, and to the hest of my l	cnowledge and helief it is
		ties of perjuly, received that related examined this return, including accompanying schedule, and complete. Declaration of preparer (other than officer) is based on all information of wh		-	and other, it is
1100	, 00,100,	, and competence of property (affect than chiesely is easily an information of m	поп ргорагог	1/2/1	1
Sia	,	Signature of officer		Date	
Sign Here		CHRIS WELBORN, CO-TREASURER			
1101		Type or print name and title			
		Print/Type preparer's name  Preparen's signature	] [	Date Check	PTIN
Paid	ı	ALAN OLSEN, CPA	//  i	or 7/7 If self-employed	P00547129
			LLP	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	94-2231697
	Only	Firm's address 39159 PASEO PADRE PKWY, #315	<del></del>	1	<del> </del>
		FREMONT, CA 94538		Phone no. ( <b>51</b>	0) 797-8661
Ma <sup>*</sup>	——— ∕ the I⊟	RS discuss this return with the preparer shown above? (see instructions)		1	X Yes No
	01 11-1		ons.	<del></del>	Form <b>990</b> (2016)

<u>Form</u>	990 (2016) FOUNDATION	<u>48-1298690</u>	Page <b>2</b>
Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	•	
1	Briefly describe the organization's mission:  THE FOUNDATION IS SET UP TO PROVIDE FINANCIAL SUPPORT TO EDUCATION.	) PUBLIC	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule O.	Ye	s X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O.	Ye	s X No
4	Describe the organization's program service accomplishments for each of its three largest program services, as Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to othe revenue, if any, for each program service reported.		
4a	(Code ) (Expenses \$ 3,179,962. Including grants of \$ 3,179,962.) (Revenue THE ANNUAL CAMPAIGN SOLICITS DONATIONS TO COVER THE DIFFERENCE OF BULLIS CHARTER SCHOOL A OF STATE FUNDING RECEIVED BY THE SCHOOL.	FERENCE BET	
4b	(Code) (Expenses \$ 204,441. Including grants of \$ 204,441. ) (Revenue ADDITIONAL SUPPORT PROVIDED TO PAY EXPENSES OF BULLIS CHARACTERS OF BULLIS CHARAC		OL.
4c	(Code) (Expenses \$	Je \$	)
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$	)	
<u>4e</u>	Total program service expenses ► 3,391,903.	Form	990 (2016)

	rt IV Checklist of Required Schedules	<u> </u>	) <u> </u>	age S
	Oncornot of Frequency Constants		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		Tes	NO
•	If "Yes," complete Schedule A	,	x	Ì
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	<del> </del> -
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			<del> </del>
3	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effe			
•	during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	<del>  •</del>	<del>                                     </del>	
3	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u>                                   </u>		
Ü	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part	1 6	}	X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	·   •		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
Ŭ	Schedule D, Part III	8	}	x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for		<b>)</b> —	
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?		ļ	į
	If "Yes," complete Schedule D, Part IV	9	ĺ	x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanen			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X		<del></del> -	
	as applicable.		İ	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		}	]
	Part VI	11a	ļ	X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		i	
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>X</u>
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	ļ		
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u>X</u> _
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
40	1c and 8a? If "Yes," complete Schedule G, Part II	18_	X	
10	LUID TOP OF CONTRACTOR FOR OF THE PART WAS A VIOLATED TO BE A COMMON COMMON CONTRACTOR OF THE PART COMMON CONTRACTOR OF THE PART COMMON CONTRACTOR OF THE PART C			

complete Schedule G, Part III

Pa	rt IV Checklist of Required Schedules (continued)	<u> </u>	•	age
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	(	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	1		Į .
	Schedule J	23	ĺ	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a	ĺ	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
đ	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete		ļ	
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			Ì
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			ĺ
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			1
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30_		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		_X_
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	1	'	
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		•	
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		_ <u>X</u> _
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		l	
	Part V, line 1	34		<u>X</u>
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		<u> X</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	1 30	X I	

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	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	,		l
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	] '		İ
	(gambling) winnings to prize winners?	1c	X	L
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return			
b	if at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a		' I	
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country. ►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a			' Ì	
	any contributions that were not tax deductible as charitable contributions?	6a		X
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	_	7.5	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X	
ь		7b	X	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	İ	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	/-		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
•	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	_8		
9	Sponsoring organizations maintaining donor advised funds.	_		
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12		ĺ	
b				
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders	-	İ	
þ		, ,		
40.	amounts due or received from them)  [11b]  [2-15	1	-	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year  Section 501(a)(20) qualified perprefit health incurance issuers	1 1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?	13a		
a	Note. See the instructions for additional information the organization must report on Schedule O.	132	-+	
h	Enter the amount of reserves the organization is required to maintain by the states in which the	( (	l	
J	organization is licensed to issue qualified health plans			
С				,
14a		14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		- <del></del> -
			990	20161

Form 990 (2016)

FOUNDATION

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check it Schedule O contains a response or note to any line in this Part VI			لیک
96C	tion A. Governing Body and Management		· ·	
	Enter the number of voting members of the governing body at the end of the tax year 21		Yes	_No
1a		1		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.  Enter the number of voting members included in line 1a, above, who are independent  1b			
		i		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			v
_	officer, director, trustee, or key employee?	_2_		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	_ '		v
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	-	X
6	Did the organization have members or stockholders?	6_	-	
/ a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	7-		х
_	more members of the governing body?  Are any approval by mambers, steekholders, or	7 <u>a</u>		
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	76		х
	persons other than the governing body?	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	9-	х	
	The governing body?  Fach committee with authority to act on hebalf of the governing body?	8a 8b	X	
	Each committee with authority to act on behalf of the governing body?	OD	^	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	9	- 1	X
Sec	organization's mailing address? If "Yes," provide the names and addresses in Schedule O tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
<u> </u>	tion b. Folicies (This Section B requests information about policies not required by the internal nevertibe Code)		Yes	No
1O2	Did the organization have local chapters, branches, or affiliates?	10a	163	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	104		
•	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
_	in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		Х
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	ļ	X
	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		1	
	taxable entity during the year?	16a		X
þ	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's		İ	
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►CA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	avaılab	le	
	for public inspection Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records.			
	CHRIS WELBORN - 916-715-8000			
	102 W PORTOLA AVENUE, LOS ALTOS, CA 94022		990	00:-
83200	0 11 11 10	Form		フロコにり

FOUNDATION Form 990 (2016)

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Page 7

#### Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

	Office if Octredible O contains a ros	Johnso of floto to drift mile in this 7 drt vii		
Continu A	Officers Directors Trustons Ko	Employees, and Highest Compensated I	Employees	
Section A.	Unicers, Directors, Trustees, Ne	<u> Employees, and riighest Compensated i</u>	Limpioyees	

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order. individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons

(A) Name and Title	(B) Average hours per	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					han	( <b>D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) ALBERT CHAN	2.00									
BOARD MEMBER		X	$\dashv$					0.	0.	0.
(2) ANDREA MOROKUTTI	2.00									_
SECRETARY		X	$\dashv$	X			<u> </u>	0.	0.	0.
(3) CECILY ZHANG	2.00	l								_
BOARD MEMBER		X						0.	0.	0.
(4) CHRIS WELBORN	8.00									
<u>CO-TREASURER</u>		X	_	X				0.	0.	0.
(5) CHRISTINE KANI	2.00	١ ا								•
BOARD MEMBER		Х						0.	0.	0.
(6) GAM KAUSHEK	2.00	l l						_		•
BOARD MEMBER	10.00	X				-	-	0.	0.	0.
(7) GERRI BOCK	10.00			٠,				_	ا م	•
CO-VICE CHAIR		X		X		-	-	0.	0.	0.
(8) KIM MONSALVE	2.00							_		•
BOARD MEMBER	20.00	X	$\dashv$			-		0.	0.	0.
(9) LAURA GWOSDEN	20.00									•
CHAIRMAN	2 00	X	-	X		-	<del> </del>	0.	0.	0.
(10) LEE LEVY	2.00	,,								•
BOARD MEMBER	2 00	X	-				-	0.	0.	0.
(11) LIPING ZHU	2.00									•
BOARD MEMBER	10.00	X				-	-	0.	0.	0.
(12) LISA COLLART	10.00	,,								•
BOARD MEMBER	0 00	X					-	0.	0.	0.
(13) LISA YU	8.00	$ \mathbf{x} $	l	X				0.	0.	^
CO-TREASURER	4 00				_	├-				0.
(14) LOUISE TSOI	4.00	x						0.	0.	0.
BOARD MEMBER	2.00			-	-	<del>                                     </del>	-	<u> </u>		<u> </u>
(15) MICHELLE WONG BOARD MEMBER	2.00	$ \mathbf{x} $		•				0.	o.	0.
(16) PANIDA TING	2.00	4,			$\vdash$	-	$\vdash$			<u></u>
BOARD MEMBER	2.00	x						0.	0.	0.
(17) PETER JEWETT	15.00	-		-	<del> </del>	<del>                                     </del>	<del> </del>		<del>-</del>	
BOARD MEMBER	15.00	x						0.	0.	0.
632007 11-11-16									<del>0 •</del> 1	Form <b>990</b> (2016)

632007 11-11-16

) <u>4                                    </u>	D DIKEEL, DULLE	2200, SAN DIEGO	J, CA		100,011.
2	Total number of independent contra \$100,000 of compensation from the	, ,	ted to those liste	d above) who received more than	
				<del></del>	Form <b>990</b> (2016)

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Form 990 (2016) FOUNDATION
Part VIII Statement of Revenue

		Check if Schedule O cont	ains a response o	or note to any line	n this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ts st	1 a	Federated campaigns	1a		<u> </u>			
Contributions, Gifts, Grants and Other Similar Amounts	b		1b					
		Fundraising events	1c	1,988,				
		Related organizations	1d					
	e	O	ions) 1e					
	f	AD 0						
		similar amounts not included abo	1 1	3,724,940.				
	q	Noncash contributions included in lines	1a-1f \$	517,809.				
g g		Total. Add lines 1a-1f		•	3,726,928,			
<u> </u>				Business Code				
Program Service Revenue	2 a							<del></del>
	b							
E S	С	·						<del> </del>
Re	d	<u> </u>						<del></del>
5_	е	'						
٩	f	All other program service reve	enue					-
	9	Total. Add lines 2a-2f			<del></del>			
ļ	3	Investment income (including	dıvıdends, intere	est, and				1
		other similar amounts)	• •	. •	106,214.			106,214.
	4	Income from investment of ta	x-exempt bond p	roceeds				<del> </del>
	5	Royalties		<b>D</b>				
			(ı) Real	(II) Personal				İ
	6 a	Gross rents						
	b	•		ļ				
	С	: Rental income or (loss)		L				
		Net rental income or (loss)		,				
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory	1,332,899.					
	b	Less: cost or other basis						
		and sales expenses	1,189,664.	<u> </u>				
		Gain or (loss)	143,235.	L				
		Net gain or (loss)	•		143,235.			143,235.
e	8 a	Gross income from fundraisin	-					
Ven	l	including \$1		ļ ļ				
Other Reven		contributions reported on line	•					
Je.		Part IV, line 18		343,235,				
₹		Less: direct expenses		53,555.				
		Net income or (loss) from fund	_	<b>_</b>	289,680,			289,680.
	9а	Gross income from gaming ac		]				
		Part IV, line 19	а	<u> </u>				
		Less: direct expenses	b				-	-
		Net income or (loss) from gan	-	·				<del> </del>
	10 a	Gross sales of inventory, less		ļ				
		and allowances	. a	<del></del>				
		Less. cost of goods sold	b					
		<ul> <li>Net income or (loss) from sale</li> <li>Miscellaneous Revenu</li> </ul>		Business Code	<del></del>	<del></del>		<del> </del>
	11 a			Business Code				
	b						<del></del>	<del> </del>
	C							<del> </del>
į		: I All other revenue	<del></del>					
		Total. Add lines 11a-11d						
	12	Total revenue. See instructions.	• •		4,266,057,	0.	0	539 129
63200	9 11-1					·		Form <b>990</b> (2016)

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Form 990 (2016)

FOUNDATION

Part IX	Statement of Function	al Expenses

Secu	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respons			приете сования угу.	
Do n	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D) Fundraising
	Bb, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	3,391,903.	3,391,903.		
2	Grants and other assistance to domestic				
	ındıvıduals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	1			
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				<del></del>
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
_	Management .				
b	Legal .	22,475.		22,475.	
C	Accounting Lobbying	44,413.		22,275.	
d	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	3,911.		3,911.	<del></del>
13	Office expenses	70.		70.	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
·	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	CONSULTING FEES	17,530.		17,530.	·
b	BANK CHARGE	17,304.		17,304.	
C	LEADERSHIP CIRCLE RECOG	6,061.			6,061.
ď	PRINTING	2,073.		2,073.	
е	All other expenses	2,566.		1,304.	1,262.
25	Total functional expenses. Add lines 1 through 24e	3,463,893.	3,391,903.	64,667.	7,323.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				- 000

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Form **990** (2016)

FOUNDATION

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Part X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 618,899. 1,348,030. Cash · non-interest-bearing 1,806,909. 29,785. Savings and temporary cash investments 2 3 3 Pledges and grants receivable, net 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 287,170. 287,170. Notes and loans receivable, net Inventories for sale or use 8 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 10b b Less: accumulated depreciation 10c 2,837,967. 4,659,422. 11 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 14 14 Intangible assets 15 Other assets See Part IV, line 11 15 Total assets. Add lines 1 through 15 (must equal line 34) 5,550,945 6,324,407 16 16 17 17 Accounts payable and accrued expenses . 18 Grants payable 18 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X of 12,606. 12,606. 25 Schedule D 12,606. 12,606. Total liabilities, Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 5,462,436. 6,235,458. 27 Unrestricted net assets 50,000. 50,000. 28 Temporarily restricted net assets 25,903. 26,343. 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32 5,538,339. 6,311,801. 33 33 Total net assets or fund balances 6,324,407. 5,550,945. Total liabilities and net assets/fund balances

Form 990 (2016)

Form	990 (2016) FOUNDATION	<u>48-12</u>	98690	Pag	ge <b>12</b>
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
		İ			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,266		
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,463		
3	Revenue less expenses. Subtract line 2 from line 1	3			64.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,538		
5	Net unrealized gains (losses) on investments .	5	-28	7	01.
6	Donated services and use of facilities	6			
7	Investment expenses .	7			
8	Prior period adjustments .	8	<del></del>		
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			_	
r <del>_</del> -	column (B))	10	6,311	. , 8	<u>02.</u>
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		··		X
1	Accounting method used to prepare the Form 990: X Cash Accrual Other		_ [ ]	Yes	No
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	ı O.		- 1	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u> _
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a		}	
	separate basis, consolidated basis, or both.				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,		İ	
	consolidated basis, or both:			1	
	X Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ie audit,		[	
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch			1	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt			
	Act and OMB Circular A-133?		3a		<u>X</u> _
þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ııred audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		l 3h l		

Form **990** (2016)

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Name o	of the organization BULI		MA ELEMENTAR	Y SCH	OOL		, -	identification number		
I		DATION	A II					8-1298690		
Part	<del></del>						<u>s.                                    </u>			
The org	anization is not a private found									
-1 ├_	A church, convention of ch					1)(A)(i).				
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)									
3	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).									
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,									
	city, and state									
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in									
	section 170(b)(1)(A)(iv). (Complete Part II.)									
6	A federal, state, or local go	vernment or governn	nental unit described in :	section 17	70(b)(1)(A)	(v).				
7 LX	An organization that norma	ally receives a substa	intial part of its support f	rom a gov	ernmental	unit or from t	he general	public described in		
	_ section 170(b)(1)(A)(vi). (0	Complete Part II.)								
8 <u> </u>	A community trust describ	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)						
9 🗀	An agricultural research or	ganızatıon described	in section 170(b)(1)(A)(	ix) operate	ed in conju	inction with a	land-grant	college		
	or university or a non-land-	grant college of agric	culture (see instructions).	Enter the	name, city	y, and state o	f the colleg	e or		
	university:					<del></del> ,				
10 🗀	An organization that norma	ally receives: (1) more	than 33 1/3% of its sup	port from	contributi	ons, members	ship fees, a	nd gross receipts from		
	activities related to its exer	mpt functions - subje	ct to certain exceptions,	and (2) no	more tha	in 33 1/3% of	its support	t from gross investment		
	income and unrelated busi	iness taxable income	(less section 511 tax) fr	om busine	sses acqu	ured by the or	ganızatıon	after June 30, 1975.		
	See section 509(a)(2). (Co	mplete Part III.)								
11 🗀	An organization organized	and operated exclus	ively to test for public sa	fety See	section 50	09(a)(4).				
12	An organization organized	and operated exclus	ively for the benefit of, to	perform	the functio	ons of, or to ca	arry out the	purposes of one or		
	more publicly supported o	rganizations describe	ed in <b>section 509(a)(1)</b> o	r section	509(a)(2).	See section 5	509(a)(3). <sup>(</sup>	Check the box in		
	lines 12a through 12d that	describes the type o	of supporting organization	n and con	nplete lines	s 12e, 12f, and	d 12g.			
а	Type I. A supporting org	anızatıon operated, s	supervised, or controlled	by its sup	ported org	ganization(s), t	typically by	giving		
	the supported organizati	on(s) the power to re	gularly appoint or elect a	a majority	of the dire	ctors or truste	es of the s	upporting		
	organization. You must	complete Part IV, Se	ections A and B.							
ь [	Type II. A supporting org	ganization supervised	d or controlled in connec	tion with it	s support	ed organizatio	n(s), by ha	ving		
	control or management	of the supporting org	anization vested in the s	ame perso	ons that co	ontrol or mana	ige the sup	ported		
	organization(s) You mus	st complete Part IV,	Sections A and C.							
c [	Type III functionally into	egrated. A supportin	g organization operated	ın connec	tion with,	and functiona	lly integrate	ed with,		
	its supported organization	n(s) (see instructions	s). You must complete i	Part IV, Se	ections A,	D, and E.				
d [	Type III non-functional	y integrated. A supp	orting organization oper	ated in co	nnection v	with its suppor	rted organı	zation(s)		
	that is not functionally in						-			
	requirement (see instruc	tions). <b>You must cor</b>	nplete Part IV, Sections	s A and D,	and Part	v.				
е [	Check this box if the org	-	-	-			II, Type III			
_	functionally integrated, of						.,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
f E	nter the number of supported	• .	7 0 11	3 - 3 -						
αP	rovide the following informatio	n about the supporte	ed organization(s).	•						
	(i) Name of supported	(ıi) EIN	(iii) Type of organization	(iv) is the orga	inization listed ing document?	(v) Amount of	monetary	(vi) Amount of other		
	organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	nstructions)	support (see instructions)		
					ĺ					
				}		1				
							<u> </u>			
	<u> </u>							-,		
				]	1	]				
	· · · · · · · · · · · · · · · · · · ·	1								
Total										
	r Paperwork Reduction Act	Notice, see the Insti	ructions for Form 990 c	r 990-EZ.	632021 09-	-21-16 Sched	dule A (For	m 990 or 990-EZ) 2016		

13

BULLIS-PURISSIMA ELEMENTARY SCHOOL Schedule A (Form 990 or 990 EZ) 2016 FOUNDATION 48-1298690 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2012 (b) 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2490020. 3093908. 3111739. 3362104. 3726928. 15784699. 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 2490020. 3093908. 3111739. 3362104. 3726928.15784699. The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11. column (f) 6 Public support. Subtract line 5 from line 4 15784699. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2012 (b) 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total 7 Amounts from line 4 2490020. 3093908. 3111739. 3362104. 3726928.15784699. 8 Gross income from interest. dividends, payments received on securities loans, rents, royalties and income from similar sources 146,879. 117,796. 110,159. 102,530. 580,015. 102,651. Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 16364714. 12 Gross receipts from related activities, etc. (see instructions) 1,494,068. 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f)) 14 96.46 15 Public support percentage from 2015 Schedule A, Part II, line 14 15 95.26 stop here. The organization qualifies as a publicly supported organization  $\triangleright \mathbf{X}$ 

16a 33 1/3% support test - 2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support test - 2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10% -facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2016

# Schedule A (Form 990 or 990 EZ) 2016 FOUNDATION Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support								_
Cale	endar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e	2016	(f) Total	
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	ınclude any "unusual grants ")					<u> </u>			
2	Gross receipts from admissions,								_
	merchandise sold or services per-								
	formed, or facilities furnished in any activity that is related to the								
	organization's tax-exempt purpose								
3	Gross receipts from activities that								_
	are not an unrelated trade or bus-								
	iness under section 513								
4	Tax revenues levied for the organ-	-							_
	ization's benefit and either paid to				Ì				
	or expended on its behalf					]			
5	The value of services or facilities								_
9	furnished by a governmental unit to								
	the organization without charge								
	Total, Add lines 1 through 5	-		<u> </u>					_
	•					<del> </del>			_
7 6	Amounts included on lines 1, 2, and								
	3 received from disqualified persons	-							_
L	Amounts included on lines 2 and 3 received from other than disqualified persons that							•	
	exceed the greater of \$5,000 or 1% of the								
	amount on line 13 for the year								_
	Add lines 7a and 7b	•				_		<del></del>	_
	Public support. (Subtract line 7c from line 6)	_			<u> </u>	<u> </u>			_
	ction B. Total Support	г		<del> </del>	<del></del>			<del></del>	_
	endar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e)	2016	(f) Total	_
-	Amounts from line 6					ļ			_
10a	a Gross income from interest, dividends, payments received on								
	securities loans, rents, royalties								
	and income from similar sources								
t	Unrelated business taxable income								
	(less section 511 taxes) from businesses								
	acquired after June 30, 1975								
(	Add lines 10a and 10b								_
11	Net income from unrelated business								-
	activities not included in line 10b, whether or not the business is								
	regularly carned on								
12	Other income Do not include gain								-
	or loss from the sale of capital assets (Explain in Part VI.)								
13	Total support. (Add lines 9, 10c, 11, and 12)								-
	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth ta	ax vear as a section	n 501(c	)(3) organiz	ation.	-
	check this box and stop here	ŭ	,		,		,(=, =:g=:=	▶□	
Se	ction C. Computation of Publ	ic Support Pe	rcentage		<del> </del>				-
	Public support percentage for 2016 (		<del></del>	column (f))		15	· · · · · · · · · · · · · · · · · · ·	%	ŕ
	Public support percentage from 2015		·-	\ <i>''</i>		16		%	_
	ction D. Computation of Inve							- <u></u> -	-
	Investment income percentage for 20	•		ne 13. column (fl)		17	•	%	- 'n
18				, ,		18		%	_
	a 33 1/3% support tests - 2016. If the			on line 14. and line	i 15 is more than 3		. and line 1		-
	more than 33 1/3%, check this box a						,	▶ [ ]	
ŀ	33 1/3% support tests - 2015. If the	•	-	•			33 1/3%	and	
•	line 18 is not more than 33 1/3%, che							<b>.</b>	
20	Private foundation. If the organization			•			-		
<u>-v</u>	ato roundation, it the organizatio	n did not offect a	200 OH III 10 14, 13	a, or 100, chock to	IIO DON GITO SOO IIIS	in uction		·	-

# Schedule A (Form 990 or 990-EZ) 2016 FOUNDATION Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A D, and F. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

	and b. If you on bord 125 of 1 art i, complete contains it and c. If you choose 125 of 1 art i, complete			
	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)			
Sec	tion A. All Supporting Organizations		T	т
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			ĺ
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by	-		
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1	<del> </del>	┢
2	Did the organization have any supported organization that does not have an IRS determination of status	ļ		ļ
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
_	organization was described in section 509(a)(1) or (2).	2	<del> </del>	<del> </del>
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			1
	(b) and (c) below.	3a	┼──	<del>                                      </del>
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the	25		
_	organization made the determination	3b	<del>                                     </del>	-
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)	20		
4-	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c	<del> </del>	<del>                                     </del>
43	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	40		
_	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign	4a	+	<del> </del>
b	supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations.	4b	ĺ	(
_	Did the organization support any foreign supported organization that does not have an IRS determination	40	<del> </del>	
C	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used	İ	[	
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)	ļ		]
	purposes.	4c	-	
52	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"		<del>                                     </del>	
ou	answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;			}
	(iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action	-		
	was accomplished (such as by amendment to the organizing document)	5a	_	1
h	Type I or Type II only. Was any added or substituted supported organization part of a class already	-7		
_	designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class	1	1	
	benefited by one or more of its supported organizations, or (iii) other supporting organizations that also			
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in	1.		
	Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor		[	[
	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with		]	_
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7	<u> </u>	
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	ļ		
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8	<u> </u>	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more	ł		
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described			
	ın section 509(a)(1) or (2))? If "Yes," provide detail ın Part VI.	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which		]	
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	_9b	<b> </b>	<u> </u>
C			] .	]
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c	<u> </u>	<u> </u>
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section		]	]
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			

determine whether the organization had excess business holdings.)

		<u> 29869</u>	U P	age 5
Pa	rt IV   Supporting Organizations (continued)	<del></del>	V	
44	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
11	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	1	İ	
a	below, the governing body of a supported organization?	11a		1
h	A family member of a person described in (a) above?	11b	<b> </b>	<u> </u>
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
_	tion B. Type I Supporting Organizations	1		
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			ĺ
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or		1	]
	controlled the organization's activities. If the organization had more than one supported organization,	1		
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	1	ļ	ļ
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1_		<u> </u>
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in		1	1
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			ļ
	supervised, or controlled the supporting organization.	2	İ	ĺ
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	}	ļ	-
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		1	
	or management of the supporting organization was vested in the same persons that controlled or managed		-	
	the supported organization(s).	<u> </u>	<u> </u>	<u> </u>
Sec	ction D. All Type III Supporting Organizations			,
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	1		
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			ļ
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			Ì
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		ļ
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2	ļ	
3	By reason of the relationship described in (2), did the organization's supported organizations have a	1	}	
	significant voice in the organization's investment policies and in directing the use of the organization's			1
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	ļ		
_	supported organizations played in this regard.	3	<u> </u>	<u></u>
Sec	ction E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).			
а				
b				
C		tructions		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а		-		
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI Identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,	ļ		
	how the organization was responsive to those supported organizations, and how the organization determined	ł		
	that these activities constituted substantially all of its activities.	2a_	<u> </u>	<u> </u>
b				
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these		-	-
	activities but for the organization's involvement.	2b	<del> </del>	ļ
3	Parent of Supported Organizations Answer (a) and (b) below.			
a				
	trustees of each of the supported organizations? Provide details in Part VI.	3a		<b></b>
b			1	
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	<u> </u>	<u> </u>

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_	dule A (Form 990 or 990 EZ) 2016 FOUNDATION			<u>48-1298690 Page 6</u>
Pai	Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orgar	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on	Nov. 20, 1970 (explain in	Part VI.) See instructions. A
	other Type III non-functionally integrated supporting organizations must co	mplete Se	ctions A through E.	
Sect	on A - Adjusted Net Income	}	(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3_	Other gross income (see instructions)	3		
	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		<u> </u>
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
_	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI).			
_2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3_	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,	1		
	see instructions)	4		
_5_	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
_7_	Recoveries of prior-year distributions	7		
_8_	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1_1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
_5	Income tax imposed in prior year	5	<del></del>	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6	<del></del>	
7	Check here if the current year is the organization's first as a non-functional	lly integrat	ed Type III supporting or	ganization (see

instructions)

Sch	edule A (Form 990 or 990-EZ) 2016 FOUNDATION			48-1298690 Page 7
Ь—	rt V Type III Non-Functionally Integrated 50	9(a)(3) Supporting Org	anizations (continued)	
Sec	tion D - Distributions			Current Year
_1	Amounts paid to supported organizations to accomplish ex			
2	Amounts paid to perform activity that directly furthers exert	npt purposes of supported		
	organizations, in excess of income from activity			
_3_	Administrative expenses paid to accomplish exempt purpose	ses of supported organization	ns	
_4	Amounts paid to acquire exempt-use assets			
_5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which	the organization is responsiv	/e	
	(provide details in Part VI). See instructions			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
_1_	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-		<u> </u>	
	able cause required- explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016:			
a				
b				
С	From 2013			
_ d	From 2014			
е	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)		<del></del>	
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2016 from Section D,			
	line 7:			
а	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions			
7	Excess distributions carryover to 2017. Add lines 3j	·		
	and 4c			
8	Breakdown of line 7:			<del></del>
а				
	Excess from 2013	<del></del>		
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

Schedule A	Form 990 or 990 EZ) 2016 FOUNDATION	48-1298690 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17 Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part IV, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any add (See instructions.)	a or 17b; Part III, line 12; es 1 and 2; Part IV, Section C, art V. Section B. line 1e: Part V.
		-
		<del></del>
	· · · · · · · · · · · · · · · · · · ·	

#### SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.lrs.gov/form990.

2016
Open to Public Inspection

Name of the organization

BULLIS-PURISSIMA ELEMENTARY SCHOOL

Employer identification number

FOUNDATION 48-1298690 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure □ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last Held at the End of the Tax Year day of the tax year. a Total number of conservation easements 2b **b** Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

25

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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2016

	dule D (Form 990) 2016 FOUNDA'T						98690	
Par								
3	Using the organization's acquisition, accessi	on, and other records	s, check any of the	following that are a	significant i	use of its	collection	ıtems
	(check all that apply):							
а	Public exhibition	d	Loan or exc	hange programs				
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explain	n how they further th	ne organization's ex	empt purpo	se in Par	t XIII.	
5	During the year, did the organization solicit o							
•	to be sold to raise funds rather than to be ma						Yes	
Par	t.IV Escrow and Custodial Arran				n Form 990	). Part IV.		
<u></u>	reported an amount on Form 990, Par		to ii iiio organizano	.,		,, , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	Is the organization an agent, trustee, custod		lary for contribution	s or other assets no	t included			
ıa		an or other intermed	lary for contribution	15 Of Other assets file	i iriciaaea		Yes	X No
	on Form 990, Part X?					L	_ tes	NO لکما
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:		Г			<del></del>
							Amount	
	Beginning balance				1c			
d	Additions during the year .				1d			
е	Distributions during the year				1e			
f	Ending balance							
<b>2</b> a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for escrow or cu	ustodial account liab	ılıty?	L_	Yes	L No
<u> </u>	If "Yes," explain the arrangement in Part XIII.							
Par	t V Endowment Funds. Complete	f the organization and	swered "Yes" on Fo	orm 990, Part IV, line	10.			
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three y	ears back	(e) Four	years back
1a	Beginning of year balance	25,903.	18,352,	17,002.		38,829.		35_578
b	Contributions			, , , , , , , , , , , , , , , , , , , ,				2,000
c	Net investment earnings, gains, and losses	440.	7.551.	1.350.			<u></u>	1,251
d	Grants or scholarships		,,,,,,,,	1,350,				1,891
	Other expenditures for facilities							
•	·					04 000	1	
	and programs				<del> </del>	21,827.	<del></del>	
т	Administrative expenses						<del> </del>	
g	End of year balance	26,343,	25,903,	18,352.	L	<u>17,002.</u>	<u> </u>	38,829
2	Provide the estimated percentage of the curr	rent year end balanc	· -	a)) held as:				
	Board designated or quasi-endowment		_%					
	Permanent endowment	<b></b> %						
С	Temporarily restricted endowment	%						
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%						
За	Are there endowment funds not in the posse	ession of the organiza	ation that are held a	nd administered for	the organiz	ation.	_	
	by:							Yes No
	(i) unrelated organizations						3a(i)	X
	(ii) related organizations						3a(ii)	X
ь	If "Yes" on line 3a(ii), are the related organiza	ations listed as requir	ed on Schedule R?				3b	
4	Describe in Part XIII the intended uses of the						L	
Par				<del></del>				
	Complete if the organization answere		), Part IV. line 11a S	See Form 990. Part X	(, line 10.			
	Description of property	(a) Cost or of			ccumulate	d T	(d) Book	- value
	bescription of property	basis (investr		.   ' '	epreciation	٠	(a) book	. value
	Land	Dadid (IIIVESIII	Dasis	(Ostrier) GE	prociation			
-	Land	•			<del></del>			
b	Buildings			<del></del>				
С	Leasehold improvements							
	Equipment							
	Other .	<u>. L</u>						
Total	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, column (B), line 1	(0c.)				0

	SSIMW EDEWE	MIARI SCHOOL	18	-1298690 Page
Schedule D (Form 990) 2016 FOUNDATION Part VII Investments - Other Securities.				-1230030 Page
Complete if the organization answered "Yes"	on Form 000 Bort IV	line 11h See Form 900 I	Port V. lino 10	
	(b) Book value			-of-year market value
(a) Description of security or category (including name of security)	(b) BOOK Value	(C) Welliod Of Va	dation. Cost of end	Oryear market value
(1) Financial derivatives				
(2) Closely-held equity interests	<del></del>			<del></del>
(3) Other				<del></del>
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)	<del> </del>			
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.				
	F 000 D-+N/		Dark V. Irra 40	
Complete if the organization answered "Yes"		Ine 11c. See Form 990, I	Part X, line 13.	-of-year market value
(a) Description of investment	(b) Book value	(C) NIBITIOU OF VA	aluation Cost of end	-Oryear market value
(1)			<del></del>	<del></del>
(2)			<del></del>	
				<u></u>
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets.	L <del> </del>			
Complete if the organization answered "Yes"	on Form 990. Part IV.	line 11d. See Form 990.	Part X. line 15.	
	Description	<del></del>		(b) Book value
(1)	· · · · · · · · · · · · · · · · · · ·			
		· · · · · · · · · · · · · · · · · · ·		
(2)			<del></del>	<del> • •</del>
(3)				
(4)	<del></del>			
(5)				
(7)	<del> </del>			·
(8)				<del></del>
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 15.)		<b>&gt;</b>	
Part X Other Liabilities.				
Complete if the organization answered "Yes"	on Form 990, Part IV,	line 11e or 11f. See Forn	n 990, Part X, line 25	
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2) OTHER LIABILITY		12,606.		
(3)				
(4)				
(5)				
(6)				
(8)				
(9)				
Total, (Column (b) must equal Form 990, Part X, col. (B) lin	e 25 )	12.606.		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2016

Sche	dule D (Form 990) 2016 FOUNDATION			48-1298690 Page 4
Pai	t XI Reconciliation of Revenue per Audited Financia	al Stateme	nts With Reve	nue per Return.
	Complete if the organization answered "Yes" on Form 990, Pai	rt IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statemen	nts		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments		2a	
b	Donated services and use of facilities		2b	
С	Recoveries of prior year grants		2c	
d	Other (Describe in Part XIII )		2d	
е	Add lines 2a through 2d			2e
3	Subtract line 2e from line 1			3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.			
а	Investment expenses not included on Form 990, Part VIII, line 7b		4a	
b	Other (Describe in Part XIII.)		4b	
С	Add lines 4a and 4b			4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, I			5
Pa	rt XII Reconciliation of Expenses per Audited Financ	ial Statem	ents With Expe	enses per Return.
	Complete if the organization answered "Yes" on Form 990, Pal	ırt IV, line 12a.	<u> </u>	
1	Total expenses and losses per audited financial statements			1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		1 1	
а	Donated services and use of facilities		2a	
b	Prior year adjustments		2b	
Ç	Other losses .		2c	
d	Other (Describe in Part XIII.)	•	2d	
е	Add lines 2a through 2d .			
3	Subtract line 2e from line 1			3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		1 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b		4a	
b	Other (Describe in Part XIII.)		4b	
C	Add lines 4a and 4b			4c
5_	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I rt XIII Supplemental Information.	<u>I, line 18.)</u>		5
lines	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to pro  RT V, LINE 4:  PROVIDE FINANCIAL SUPPORT TO PUBLIC	ovide any add	itional information	, rait v, iirie 4, rait A, iirie 2, rait Ai,
63205	4 08-29-16			Schedule D (Form 990) 2016

### **SCHEDULE G** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

#### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990. BULLIS-PURISSIMA ELEMENTARY SCHOOL

Employer identification number

FOUNDAT	ION		D (	001	48-1298	690
	Complete if the organization answe	red "Y	es" or	n Form 990, Part IV,		
a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, P b If "Yes," list the 10 highest paid indicompensated at least \$5,000 by the	e Solicitat f Solicitat g Special  or oral agreement with any individual Part VII) or entity in connection with p viduals or entities (fundraisers) pursu	ion of ion of fundra (includ	non-g gover using o ding or ional f	overnment grants nment grants events fficers, directors, true undraising services?	stees, or Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have co or con contribi	Did aiser ustody trol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total		1	<b>•</b>		-	
List all states in which the organization or licensing.	on is registered or licensed to solicit o	contrib	utions	s or has been notified	I it is exempt from re	gistration
		·				

632081 09-12-16

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990 or 990-EZ) 2016

### BULLIS-PURISSIMA ELEMENTARY SCHOOL Schedule G (Form 990 or 990 EZ) 2016 FOUNDATION

48-1298690 Page 2

Pa	rt I	Fundraising Events. Complete if the fundraising event contributions and g	<b>▼</b>	· · · · · · · · · · · · · · · · · · ·		
	·		(a) Event #1  AUCTION	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
			(event type)	(event type)	(total number)	col (c))
Revenue						
eve.	1	Gross receipts	343,235.			343,235.
ш						
	2	Less: Contributions	<del>-</del>			<u> </u>
	_	0 (1 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	242 225			242 225
	3	Gross income (line 1 minus line 2)	343,235.			343,235.
	4	Cash prizes				
	•					
	5	Noncash prizes				
ses						
ben	6	Rent/facility costs				
Direct Expenses						
lec	7	Food and beverages				
۵	8	Entertainment _				
	9	Other direct expenses	53,555.			53,555.
	10	Direct expense summary. Add lines 4 through			<b>•</b>	53,555.
	11	Net income summary. Subtract line 10 from	, , , ,			289,680.
Pa	irt l	Gaming. Complete if the organization	answered "Yes" on Form	n 990, Part IV, line 19, o	reported more than	
	r	\$15,000 on Form 990-EZ, line 6a.		T	<u>r</u>	
e			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue				birigo/progressive birigo		coi. (a) trilodgi coi. (c))
æ	4	Gross revenue ·				
	Ė	GIOCO TOTOTICO				
တ္သ	2	Cash prizes				
Direct Expenses						
.x.	3	Noncash prizes .				
SC E						
Dire	4	Rent/facility costs				
	5	Other direct expenses				
	3	Cutor direct expenses	Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No	No No	÷
		,	<del></del>			
	7	Direct expense summary. Add lines 2 through	gh 5 in column (d)		<b>&gt;</b>	
	8	Net gaming income summary Subtract line	7 from line 1, column (d)	·	<u>&gt;</u>	<u> </u>
•	<b>-</b> -	ter the state(s) in which the organization cond	luota aamina aatiivitias:			
		the organization licensed to conduct gaming a				Yes No
		No," explain:				165110
	_					
		ere any of the organization's gaming licenses		_	year?	Yes No
t	If "	Yes," explain.				
	_	· · · · · · · · · · · · · · · · · · ·			=	
	_		<del> </del>			
6320	82 0	9-12-16			Schedule G (Fo	orm 990 or 990-EZ) 2016

Sch	edule G (Form 990 or 990 EZ) 2016 <b>FOUNDATION</b>	18-1298690 Page 3
	Does the organization conduct gaming activities with nonmembers?	Yes No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed	
	to administer charitable gaming?	Yes No
13	Indicate the percentage of gaming activity conducted in:	1 1
	The organization's facility .	13a %
	An outside facility	13b %
14	Enter the name and address of the person who prepares the organization's gaming/special events books and record	s·
	Name	
	Address >	
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes No
t	olf "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amou	nt
	of gaming revenue retained by the third party > \$	
c	s If "Yes," enter name and address of the third party:	
	Name	
	Address ▶	
16	Gaming manager information:	
	Name	
	Gaming manager compensation ▶ \$	
	Description of services provided	
	Director/officer Employee Independent contractor	
17	Mandatory distributions:	
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to	
	retain the state gaming license?	Yes No
	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	ı the
	organization's own exempt activities during the tax year > \$	
P	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part IV	art III, lines 9, 9b, 10b, 15b,
	15c, 16, and 17b, as applicable Also provide any additional information. See instructions	
_		
_		
_		
_		
632	083 09-12-16 Schedule (	G (Form 990 or 990-EZ) 2016

Sahadula C (Farra 000 - 000 FT	BULLIS-PURISSIMA	ELEMENTARY	SCHOOL	48-1298690 Page 4
Schedule G (Form 990 or 990 EZ) Part IV Supplemental Inform	mation (continued)		<del></del>	_ <del>_</del> Page 4
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632084 04-01-18			SC	hedule G (Form 990 or 990-EZ

**SCHEDULE 1** (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

BULLIS-PURISSIMA ELEMENTARY SCHOOL

Part I General Information on Grants and Assistance

FOUNDATION

cntena used to award the grants or assistance?

1 Does the organization maintain records to substantiate the amount of the grants or assistance, and the selection

Information about Schedule I (Form 990) and its instructions is at www.lrs.gov/form990. ▶ Attach to Form 990.

2016	
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•	•	٦.
2016	(Open)to Public	Inspections

Employer identification number

48-1298690

**2** 

X Yes

Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	n of (h) Purpose of grant cance or assistance	TO PROVIDE FINANCIAL SUPPORT TO PUBLIC EDUCATION				Schedule I (Form 990) (2016)
es" on Form 990	(g) Description of noncash assistance	NONE				
 anization answered "Y	(f) Method of valuation (book, EMV, appraisal, other)	NONE				
States.	(e) Amount of non-cash assistance	0				
unds in the United Governments. Co	(d) Amount of cash grant	3,384,403,			listed in the line 1 table	:
oring the use of grant f	(c) IRC section (if applicable)	510(C)(3)			ganizations listed in the 1 table	ions for Form 990.
cedures for mont	5,000 Par II can (b) EIN	48-1298689			nd government or	see the Instruct
Contena used to award the grants of assistance?     Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete	1 (a) Name and address of organization or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or government or go	BULLIS CHARTER SCHOOL 102 W. PORTOLA AVENUE LOS ALTOS. CA 94022			2 Enter total number of section 501(c)(3) and government organizations 3 Enter total number of other organizations listed in the line 1 table	1 ~

Page 2

48-1298690

FOUNDATION

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed. Schedule 1 (Form 990) (2016)

Partill

(f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance

PART I, LINE 2:

ALL DONATIONS ARE MAINTAINED IN QUICKBOOKS AND SPECIAL DONATIONS ARE NOTED

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

AS SUCH

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632102 11-01-16

Schedule I (Form 990) (2016)

#### SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service Noncash Contributions

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

► Information about Schedule M (Form 990) and its instructions is at www.lrs.gov/form990.

OMB No 1545-0047

2016

Open To Public Inspection

Name of the organization

BULLIS-PURISSIMA ELEMENTARY SCHOOL

Employer identification number 48-1298690

Part I Types of Property (a) (d) (c) Check if Number of Noncash contribution Method of determining contributions or amounts reported on applicable noncash contribution amounts tems contributed Form 990, Part VIII, line 1g Art - Works of art Art - Historical treasures Art - Fractional interests Books and publications 5 Clothing and household goods Cars and other vehicles 7 Boats and planes 8 Intellectual property 517,809.FAIR MARKET VALUE X 9 Securities - Publicly traded Securities - Closely held stock Securities - Partnership, LLC, or 11 trust interests Securities - Miscellaneous 12 13 Qualified conservation contribution -Historic structures Qualified conservation contribution - Other 14 15 Real estate - Residential 16 Real estate - Commercial 17 Real estate - Other 18 Collectibles 19 Food inventory 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 26 Other > 27 Other 28 Other > Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 No Yes 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? X 30a b If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? X 31 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? X 32a b If "Yes," describe in Part II. 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II. LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) (2016)

<u>Sched</u> ı	ule M (Fo																<u>-1298</u>			age 2
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SCHI	EDULI	E_M,	LIN	1E 3	2B:															
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#### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ.

16

Name of the organization

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. BULLIS-PURISSIMA ELEMENTARY SCHOOL

Employer identification number 48-1298690

FOUNDATION	48-1298690
FORM 990, PART VI, SECTION B, LINE 11B:	
THE FORM 990 IS REVIEWED BY THE CO-TREASURERS AND THE CHA	IRMAN.
FORM 990, PART VI, SECTION C, LINE 19:	
THE FOUNDATION DOES NOT MAKE ITS GOVERNING DOCUMENTS AND	POLICIES AVAILABLE
TO THE PUBLIC.	
FORM 990, PART XII, LINE 2C:	
NO CHANGE.	
	<del></del>