Form 990-PF

Department of the Treasury

Internal Revenue Service

DLN: 93491311000707

2016

OMB No 1545-0052

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

Do not enter social security numbers on this form as it may be made public.
 Information about Form 990-PF and its instructions is at <a href="www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

Open to Public Inspection

or	caler	ndar year 2016, or tax year beginning 01-01-20	)16 , a	nd er	nding 12-31-	2016		
		indation nly Foundation			A Employer id	entification numbe	er	
Ue	ites raii	illy Foundation			94-3289689			
		d street (or P O box number if mail is not delivered to street address)	Room/suite		B Telephone nu	mher (see instructio	ns)	
5	55 Capı	tol Mall Suite 900			<b>B</b> Telephone number (see instructions) (916) 379-3800			
City	or towr	, state or province, country, and ZIP or foreign postal code						
Sacr	amento	, CA 95814			C If exemption	application is pendir	ng, check here ▶	
G Cł	neck al	I that apply	former public charity		<b>D 1.</b> Foreign or	ganizations, check h	ere $lacksquare$	
		☐ Final return ☐ Amended return				rganızatıons meeting		
		Address change Name change			test, chec	k here and attach co	mputation 🕨 🔽	
<b>1</b> Ch	neck ty	pe of organization Section 501(c)(3) exempt private	foundation			undation status was n 507(b)(1)(A), che		
	Section	n 4947(a)(1) nonexempt charitable trust			under seedie	11 307 (5)(1)(1)(1), 6116.	SK Here	
Fai	r mark	ket value of all assets at end J Accounting method	☑ Cash ☐ Accru	ıal	F If the founda	ation is in a 60-mont	h termination	
		from Part II, col (c),  \$ 531,683  ☐ Other (specify)			under sectio	n 507(b)(1)(B), che	ck here • L	
,,,,,	. 10)1	(Part I, column (d) must	be on cash basis )					
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and				(d) Disbursements	
		of amounts in columns (b), (c), and (d) may not necessarily	expenses per	(b)	Net investment income	(c) Adjusted net income	for charitable purposes	
		equal the amounts in column (a) (see instructions) )	books				(cash basis only	
	1	Contributions, gifts, grants, etc , received (attach schedule)	556,705	i				
	2	Check ► ☐ If the foundation is <b>not</b> required to attach						
		Sch B						
	3	Interest on savings and temporary cash investments	2	:	2			
	4	Dividends and interest from securities	7,276	5	7,276			
	5a	Gross rents						
	ь	Net rental income or (loss)						
χĘ	6a	Net gain or (loss) from sale of assets not on line 10	59,689					
Revenue	b	Gross sales price for all assets on line 6a 480,383						
æ	7	Capital gain net income (from Part IV, line 2)			59,689			
	8	Net short-term capital gain						
	9	Income modifications						
	10a	Gross sales less returns and allowances	]					
	b	Less Cost of goods sold	1					
	C	Gross profit or (loss) (attach schedule)						
	11	Other income (attach schedule)	2,468		2,468			
	12	Total. Add lines 1 through 11	626,140	<u> </u>	69,435			
	13	Compensation of officers, directors, trustees, etc						
	14	Other employee salaries and wages						
ses	15	Pension plans, employee benefits	<b>06-1</b> F6					
Ē	16a	Legal fees (attach schedule)	56					
×	b	Accounting fees (attach schedule)	8,892	_				
Operating and Administrative Expenses	С.	Other professional fees (attach schedule)	2,655	<u> </u>	2,655			
a E	17	Interest						
<u>.</u>	18	Taxes (attach schedule) (see instructions)	592	_	592			
<u> </u>	19	Depreciation (attach schedule) and depletion						
AG:	20	Occupancy						
פ	21	Travel, conferences, and meetings						
ਰ –	22	Printing and publications						
Ĕ	23	Other expenses (attach schedule)						
er al	24	Total operating and administrative expenses.	42.405		2 247			
<u>ă</u>	]	Add lines 13 through 23	12,195	_	3,247		446.50	
_	25	Contributions, gifts, grants paid	446,500	<del> </del>			446,50	
	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	458,695		3,247		446,50	
	27	Subtract line 26 from line 12	150,055		5,247		110,50	
	а	Excess of revenue over expenses and	167,445	;				
	L	disbursements Net investment income (if negative, enter -0-)		-	66,188			
	b	Adjusted net income (if negative, enter -0-)			00,100			
	C		]		C . N. 44000	<u> </u>	000 PF (221	

370,007

370.007

370,007

531,683

531.683

531,683

370,007

167,445

538,183

531,683 Form **990-PF** (2016)

6,500

731

1

2

3

4

5

Total liabilities(add lines 17 through 22) . . . . . . . . .

Foundations that follow SFAS 117, check here

Unrestricted . . . . . .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) -

Enter amount from Part I, line 27a

Temporarily restricted

Permanently restricted .

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here

Paid-in or capital surplus, or land, bldg, and equipment fund

Capital stock, trust principal, or current funds . . . . . . . . .

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

23

24

25

27

28

29

30

31

Part III

2

3

4

5

Balances

26 L 26

ō

Net Assets

Page **3** 

I GIC EV	Capital Callis and	LOSSES TOT TAX OIT TITVEST							
	List and describe the k 2-story brick warehous	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )					
1 a CHARL	ES SCHWAB - SEE ATT	2016-02-07	2016-12-07						
	ES SCHWAB - SEE ATT	2013-12-07	2016-12-07						
	ES SCHWABx7969- SE	· , ,		P	2016-06-01	2016-12-07			
	ES SCHWABx7969- SE	• ,		P	2012-06-07	2016-12-23			
е									
		(f)		(g)	,	h)			
Gr	(e) oss sales price	Depreciation allowed (or allowable)	Cost or	other basis ense of sale	Gain	or (loss) f) minus (g)			
a	8,76	7		8,37	73	394			
b	233,89	5		239,68	37	-5,792			
с	114,44	2		92,12	24	22,318			
d	123,27	9		80,5:	10	42,769			
е									
Compl	ete only for assets sho	wing gain in column (h) and ow	ned by the foundation	on 12/31/69		(I)			
F M	(i) V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) of col (i)	Gains (Col ( col (k), but not	(h) gain minus : less than -0-) <b>or</b> rom col (h))			
		as 01 12/31/09	over cor	(j), if any	203363 (11	394			
a b		+				-5,792			
		+				22,318			
		+				42,769			
d		+				42,769			
e			If gain, also enter in P		<u> </u>				
3 Nets If gai	2 Capital gain net income or (net capital loss)								
Part V	Qualification Unde	er Section 4940(e) for Re	educed Tax on Net	Investment I	ncome				
(For optional	use by domestic privat	e foundations subject to the sec	ction 4940(a) tax on ne	et investment inco	me )				
If section 494	0(d)(2) applies, leave	this part blank							
		ction 4942 tax on the distributal alify under section 4940(e) Do			d? 🔲 Y	es 🗸 No			
1 Enter t	he appropriate amount	t in each column for each year,	see instructions before	making any entr	ies				
Base period	(a) d years Calendar ,	(b)	(c)		<b>(d)</b> Distribution rai	10			
	year beginning in)	Adjusted qualifying distributions	Net value of noncharitab		(col (b) divided by				
:	2015	350,573		390,556		0 89763			
	2014	521,049		505,509		1 03074			
:	2013	376,892		708,604		0 53188			
:	2012	103,900		689,016		0 15080			
;	2011	179,253		703,918		0 25465			
2 Total o	of line 1, column (d)			2		2 865691			
numbe	r of years the foundation	the 5-year base period—divide on has been in existence if less	than 5 years	<u>3</u>		0 573138			
		ritable-use assets for 2016 fron	*	4		399,829			
				5	_	229,157			
<b>6</b> Enter 1	.% of net investment ir	ncome (1% of Part I, line 27b)		6		662			
<b>7</b> Add lın	es5and6			7		229,819			
	<b>8</b> Enter qualifying distributions from Part XII, line 4 ,								
If line 8 instruct		than line 7, check the box in Pa	art VI, line 1b, and com	plete that part us	sing a 1% tax rate Se	ee the Part VI			
					F	orm <b>990-PF</b> (2016)			

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly P	aid Employees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter	r "NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<b>Total</b> number of others receiving over \$50,000 for professional services		<b>&gt;</b>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include released organizations and other beneficiaries served, conferences convened, research papers produced to the conference of the conferen		er of Expenses
1		
2		
3		
3		
4		
Part IX-B Summary of Program-Related Investments (see	instructions)	
Describe the two largest program-related investments made by the foundation during the	ne tax year on lines 1 and 2	Amount
1		
,		
•		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		•
Total Add Intes I dillough 5		Form <b>990-PF</b> (2016)
		FULLE 330-FF (2010)

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

1b

2

3a 3h

4

5

446.500

445.838

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662

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . . . .

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

2

3

4

5

19,329

19,329

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(d)

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Part XIII	Undistributed Income (see instructions)							

**b** From 2012. . . . c From 2013. . .

d From 2014. . . . .

e From 2015. . . . .

1 Distributable amount for 2016 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2016 a Enter amount for 2015 only. . . . . . **b** Total for prior years

same amount must be shown in column (a) )

6 Enter the net total of each column as

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b . . . . . . . . . . c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . . d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . . . . f Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017 . . . . . 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . . . . . . 8 Excess distributions carryover from 2011 not

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a . . . . . .

9 Excess distributions carryover to 2017.

10 Analysis of line 9

a Excess from 2012. . .

c Excess from 2014. . . .

d Excess from 2015. . . e Excess from 2016. . .

**b** Excess from 2013. .

indicated below:

Excess distributions carryover, if any, to 2016 a From 2011. . . . .

144.251 69,839

341 970 496.360 331,527

f Total of lines 3a through e. . . . . . . .

4 Qualifying distributions for 2016 from Part XII, line 4 🕨 \$ a Applied to 2015, but not more than line 2a **b** Applied to undistributed income of prior years

(Election required—see instructions). . . . .

c Treated as distributions out of corpus (Election 

**d** Applied to 2016 distributable amount. . . . e Remaining amount distributed out of corpus

5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the

69.839

341,970

496,360

331.527

427,171

427,171 1,811,118

144.251

1,666,867

1.383.947

(a)

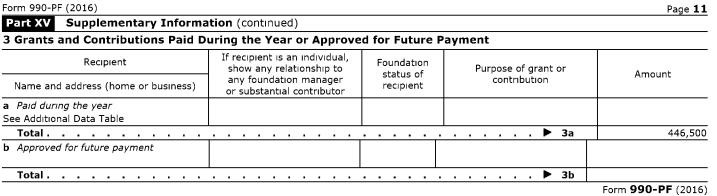
Corpus

(b)

Years prior to 2015

(c)

2015



Enter gross amounts unless otherwise indicated		Unrelated bus	iness income	Excluded by section	512, 513, or 514	(e) Related or exemp
Program	service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	function income (See instructions
f						
_	and contracts from government agencies					
	rship dues and assessments st on savings and temporary cash	-				
	ments			14	2	
	ds and interest from securities			14	7,276	
	tal income or (loss) from real estate financed property.					
	ebt-financed property					
	ntal income or (loss) from personal property					
Other II	nvestment income			14	2,468	
	r (loss) from sales of assets other than			10	50.633	
	ory			18	59,689	
	profit or (loss) from sales of inventory					
	evenue <b>a</b>					
C					69,435	
Total.	Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)			13	B	69,43
e works	neet in line 13 instructions to verify calculation	ns )	nant of Evan			
II C A V.	-B Relationship of Activities to th	e Accomplish	nent of Exem	pt Purposes		
	Explain below how each activity for which the accomplishment of the foundation's ex	income is reporte	d ın column (e) c	f Part XVI-A contribu		
ne No.	Explain below how each activity for which	income is reporte	d ın column (e) c	f Part XVI-A contribu		
ne No.	Explain below how each activity for which the accomplishment of the foundation's ex	income is reporte	d ın column (e) c	f Part XVI-A contribu		
ne No.	Explain below how each activity for which the accomplishment of the foundation's ex	income is reporte	d ın column (e) c	f Part XVI-A contribu		
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ne No.	Explain below how each activity for which the accomplishment of the foundation's ex	income is reporte	d ın column (e) c	f Part XVI-A contribu		
ne No.	Explain below how each activity for which the accomplishment of the foundation's ex	income is reporte	d ın column (e) c	f Part XVI-A contribu		

. (20	
	nformation Regarding Transfers To and Transactions and Relationships With Noncharitable
4 4 1	
	vemnt Organizations

Par	t XVII	Information Re Exempt Organi		ansf	ers To a	and Transa	ctio	ns and	d Relatio	nships With No	oncharit	able	•	
		ganization directly or in Code (other than sectio	directly enga								tion 501		Yes	No
a Tr	ansfers	from the reporting foun	dation to a no	oncha	ritable ex	empt organiza	tion	of						
(1	(1) Cash									1a(1)		No		
(2) Other assets											1a(2)		No	
		sactions												
(1) Sales of assets to a noncharitable exempt organization											1b(1)		No	
(2) Purchases of assets from a noncharitable exempt organization											1b(2)		No	
(3) Rental of facilities, equipment, or other assets										1b(3)		No		
(4) Reimbursement arrangements										•	1b(4)		No	
(5) Loans or loan guarantees											1b(5) 1b(6)		No No	
•	-	facilities, equipment, n	•		_						•	1c		No
	-	wer to any of the above			-					ways show the fair	market v			-110
of ın	the goo any trai	ds, other assets, or ser nsaction or sharing arra	vices given by ngement, sho	y the i	reporting column (c	foundation If i) the value o	the f f the	oundat goods,	ion receive other asse	d less than fair ma ts, or services rece	arket valu eived	e		
(a) Lir	ne No	(b) Amount involved	(c) Name of	noncha	ırıtable exe	mpt organizatio	n	( <b>d)</b> D	escription of	transfers, transaction	is, and shai	rıng arra	ngement	ts
							_							
de	scribed	ndation directly or indire in section 501(c) of the omplete the following si (a) Name of organization	Code (other		section 50	•	sect	ion 527				Yes	<b>☑</b> N	o
		(-,				7 . 7				(-)				
Sigr	of m	er penalties of perjury, ny knowledge and belief ch preparer has any kno	, it is true, co											
Her	- 1	*****				2017-11-07		<b>L</b>	*****		May the II with the p			
	<b>.   ₽</b> -	Signature of officer or to	rustee			Date		<u> </u>	Title		(see instr	· —		
Paic	i	Print/Type preparer's  Kim Kirkish	s name	Preparer's Signature		nature		Date		Check if self- employed ▶ □		P00286	383	
	parer Only		: Oates Const	ructio	n					<u> </u>	Firm's E	IN ►		
			5 Capitol Mal	l 9th f	loor									
		Sa	·						Phone n	o (916	379-3	3800		

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	any foundation manager or substantial contributor	recipient						
a Paid during the year								
AMERICAN VALUES 2800 SHIRLINGTON ROAD 950 ARLINGTON, VA 22206	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	1,000				
BILETNIKOFF FOUNDATION 7080 DONLON WAY STE 126 DUBLIN, CA 94568	NONE	PF	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	13,950				
CALVARY CHAPEL OF SANTA BARBARA 1 N CALLE CESAR CHAVEZ 21 SANTA BARBARA, CA 93103	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	1,700				
CAPITAL CHRISTIAN CENTER 9470 MICRON AVENUE SACRAMENTO, CA 95827	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	75,000				
COLLEGE GOLF FELLOWSHIP 5098 FOOTHILLS BLVD STE 3-138	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	500				

ROSEVILLE, CA 95747

446,500

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Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	any foundation manager or substantial contributor	recipient						
a Paid during the year								
DONOVAN CREASON MEMORIAL FUND 103 RUSSLER LANE FOLSOM, CA 95630	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	500				
EASEACED PO BOX 277996 SACRAMENTO, CA 95827	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	80,000				
EMPOWERING LIVES INTERNATIONAL PO BOX 67 UPLAND, CA 91785	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	2,000				
KLOVE RADIO 5700 W OAKS BLVD ROCKLIN, CA 95765	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	2,000				

PC

TO PROVIDE ASSISTANCE TO

ORGANIZATION'S PROGRAMS

3,000

446,500

DOWN TO EARTH 15058 ZIRCON DR

VICTORVILLE, CA 92394

Total . . 3a NONE

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	any foundation manager or substantial contributor	recipient						
a Paid during the year								
FAITH MEDICAL MISSIONS 510 W CHICKASHA AVENUE CHICKASHA, OK 73018	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	36,000				
UC DAVIS MIND INSTITUTE 4900 BROADWAY SUITE 1150 SACRAMENTO, CA 95820	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	5,000				
ASSEMBLIES OF GOD - NCN 6051 SOUTH WATT AVENUE SACRAMENTO, CA 95829	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	1,000				
PACIFIC JUSTICE INSTITUTE 9851 HORN ROAD SUITE 115 SACRAMENTO, CA 95827	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	7,500				
HAROLD & CAROLE PUMP FOUNDATION 13636 VENTURA BLVD SHERMAN OAKS, CA 91423	NONE	PF	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	21,000				

За

446,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	any foundation manager or substantial contributor	recipient						
a Paid during the year								
SAC ACCESS 4623 T STREET SUITE A SACRAMENTO, CA 95814	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	1,500				
WESTERN STATES FELLOWSHIP 6106 OCEAN VIEW DRIVE OAKLAND, CA 94618	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	10,000				
WILLIAM JESSUP UNIVERSITY 333 SUNSET BLVD ROCKLIN, CA 95765	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	45,000				
YES-YOUNG ENOUGH TO SERVE 1040 CREEK DRIVE	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	5,000				

OAKLAND, CA 94618				
WILLIAM JESSUP UNIVERSITY 333 SUNSET BLVD ROCKLIN, CA 95765	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	45,00
YES-YOUNG ENOUGH TO SERVE	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	5,00

WILLIAM JESSUP UNIVERSITY 333 SUNSET BLVD ROCKLIN, CA 95765	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	45
YES-YOUNG ENOUGH TO SERVE 1040 CREEK DRIVE	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	5

YES-YOUNG ENOUGH TO SERVE 1040 CREEK DRIVE SCOTTS VALLEY, CA 95066	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	5,000
MIKUNI CHARITABLE FOUNDATION	NONE	PF	TO PROVIDE ASSISTANCE TO	15,000

1040 CREEK DRIVE SCOTTS VALLEY, CA 95066	NONE		ORGANIZATION'S PROGRAMS	3,000
MIKUNI CHARITABLE FOUNDATION 5012 LUCE AVENUE SUITE 100	NONE	PF	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	15,000

1040 CREEK DRIVE SCOTTS VALLEY, CA 95066	NONE	PC	ORGANIZATION'S PROGRAMS	
MIKUNI CHARITABLE FOUNDATION	NONE	PF	TO PROVIDE ASSISTANCE TO	

Total . . .

За

SCOTTS VALLEY, CA 95066				
MIKUNI CHARITABLE FOUNDATION 5012 LUCE AVENUE SUITE 100	NONE	PF	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	1!

MIKUNI CHARITABLE FOUNDATION	NONE	PF	TO PROVIDE ASSISTANCE TO	15,0
5012 LUCE AVENUE SUITE 100			ORGANIZATION'S PROGRAMS	,
SACRAMENTO, CA 95652				

446,500

form 990PF Part XV Line 3 - Gran			1	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
FUTURE FOUNDATION OF SACRAMENTO 425 UNIVERSITY AVE 210 SACRAMENTO, CA 95825	NONE	PF	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	6,000
BLUE HEART INTERNATIONAL 9700 BUSINESS PARK DRIVE 105 SACRAMENTO, CA 95827	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	10,000
ADVENTURES IN MISSIONS 6000 WELLSPRING TRAIL GAINESVILLE, GA 30506	NONE	PF	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	1,000
FELLOWSHIP OF CHRISTIAN ATHLETES 8701 LEEDS ROAD KANSAS CITY, MO 64129	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	15,000
POSITIVE COACHING ALLIANCE 5701 LONETREE BLVD STE 221E ROCKLIN, CA 95765	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	13,000
Total				446,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
BAYSIDE CHURCH PO BOX 2336 GRANITE BAY, CA 95746	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	1,300
BRIDGE NETWORK 7851 35TH AVE SACRAMENTO, CA 95824	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	2,000
CA BLACK CHAMBER OF COMMERCE FOUNDA 1600 SACRAMENTO INN WAY STE 232 SACRAMENTO, CA 95815	NONE	PF	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	1,000
CAPTAIN JOSEPH HOUSE FOUNDATION 1108 S OAK STREET PORT ANGELES, WA 98362	NONE	PF	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	500
JDRF-NORTHERN CA INLAND CHAPTER	NONE	PC	TO PROVIDE ASSISTANCE TO	4,700

ORGANIZATION'S PROGRAMS

446,500

950 FULTON AVENUE STE 150

SACRAMENTO, CA 95825

Total . . За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
CITY YEAR SACRAMENTO 287 COLUMBUS AVENUE BOSTON, MA 02116	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	12,500
HOMES FOR OUR TROOPS 6 MAIN STREET TAUNTON, MA 02780	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	500
HOMETOWN HEROS 983 BADGER CIRCLE GRAFTON, WI 53024	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	1,500
LADY LIKE FOUNDATION 4859 W SLAUSIN AVE 128 LOS ANGELES, CA 90056	NONE	PF	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	7,500
LEUKEMIA LYMPHOMA SOCIETY	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	500

983 BADGER CIRCLE GRAFTON, WI 53024	NONE		ORGANIZATION'S PROGRAMS	
LADY LIKE FOUNDATION 4859 W SLAUSIN AVE 128 LOS ANGELES CA 90056	NONE	PF	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	

За

LOS ANGELES, CA 90056			ORGANIZATION'S PROGRAMS	
LEUKEMIA LYMPHOMA SOCIETY 150 COLLEGE TOWN DRIVE 3210 SACRAMENTO, CA 95826	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	5

446,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
NEWTON CADET FOUNDATION PO BOX 86522 LOS ANGELES, CA 90086	NONE	PF	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	1,000	
RIVER OAK CENTER FOR CHILDREN 5445 LAUREL HILLS DRIVE SACRAMENTO, CA 95841	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	5,000	
ST HOPE ACADEMY 3734 BROADWAY SACRAMENTO, CA 95817	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	24,100	
THESE NUMBERS HAVE FACES 537 SE ASH SUITE 204 PORTLAND, OR 97214	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	3,000	

SACRAMENTO, CA 95841				
ST HOPE ACADEMY 3734 BROADWAY SACRAMENTO, CA 95817	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	2
THESE NUMBERS HAVE FACES 537 SE ASH SUITE 204	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	

THESE NUMBERS HAVE FACES 537 SE ASH SUITE 204 PORTLAND, OR 97214	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	
TREAT EMALTICE A MING	NONE	DE	TO PROVIDE ACCICTANCE TO	

537 SE ASH SUITE 204 PORTLAND, OR 97214			ORGANIZATION'S PROGRAMS	
TREAT EM LIKE A KING 5431 AUBURN BLVD 136	NONE	PF	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	2,000

TREAT EM LIKE A KING	NONE	PF	TO PROVIDE ASSISTANCE TO	2,000
5431 AUBURN BLVD 136			ORGANIZATION'S PROGRAMS	
SACRAMENTO, CA 95841				

SACKAPIENTO, CA 930-1				
SACRAMENTO, CA 95841				
5431 AUBURN BLVD 136			ORGANIZATION'S PROGRAMS	
INLAT LITELA KING	INONE	FI	TO FROVIDE ASSISTANCE TO	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year HOLY NAMES NONE PC TO PROVIDE ASSISTANCE TO 50 1390 WILLOW PASS RD 210 ORGANIZATION'S PROGRAMS 7,700

CONCORD, CA 94520				
YOUNG WARRIORS 6507 HANNA AVENUE WOODLAND HILLS, CA 91303	NONE	PC	TO PROVIDE ASSISTANCE TO ORGANIZATION'S PROGRAMS	

446,500 Total .

За

efile GRAPHIC print - DO NOT P	ROCESS	As Filed D	ata -		DLN: 93491311000707
TY 2016 Accounting Fe	es Sch	edule	_		
	Name:	Oates Fa	mily Foundation		
<b>EIN:</b> 94-3289689					
Softw	are ID:	1600030	3		
Software \	ersion:	2016v3.0	)		
Category	Amo	ount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Accounting Fees		8,892	(		0 0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data		DLN	N: 93491311000707
TY 2016 Legal Fees Schedule				
_				
Name:	: Oates Family	y Foundation		
EIN:	94-3289689	<i>i</i>		
Software ID:	16000303			
Software Version:	2016v3.0			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Legal Fees	56	0	0	0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491311000707
TY 2016 Other Decreases Scho	edule		_
Name:	Oates Family	Foundation	
EIN:	94-3289689		
Software ID:	16000303		
Software Version:	2016v3.0		
De	escription		Amount
Nondeductible Donation			6,500

TY 2016 Other Income Schedule						
Name:	Name: Oates Family Foundation					
EIN:	94-3289689					
Software ID:	16000303					
Software Version:	2016v3.0					
Other Income Schedule						
Description		Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income		

2,468

DLN: 93491311000707

2,468

Other Investment Income

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 934913110	00707			
TY 2016 Other Increases Sche	ΓΥ 2016 Other Increases Schedule						
Name:	Oates Family	Foundation					
EIN:	94-3289689						
Software ID:	16000303						
Software Version:	2016v3.0						
De	escription		Amount				
Unrealized gain(loss) on investments				731			

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DLN	N: 93491311000707	
TY 2016 Other Professiona	I Fees Schedu	le			
Naı	<b>me:</b> Oates Family	y Foundation			
<b>EIN:</b> 94-3289689					
Software	<b>Software ID:</b> 16000303				
Software Versi	on: 2016v3.0				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
ADVISORY FEES	2,655	2,655	0	0	

efile GRAPHIC print - DO NOT	PROCESS	As Filed Data	-	DL	N: 93491311000707
TY 2016 Taxes Schedule					
					,
	Name:	Oates Family	y Foundation		!
	EIN:	94-3289689	ı		!
Soft	ware ID:	16000303			!
<b>Software Version:</b> 2016v3.0					l
Category	An	nount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Federal Tax		327	327		
Foreign Tax		180	180	1	
State Tax		85	85		

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491311000707						
Schedule B (Form 990, 990-EZ,	Schedule of Contributors		OMB No 1545-0047			
or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, or 990-PF ► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instruction www.irs.gov/form990	ons is at	2016			
Name of the organizat Oates Family Foundation	ion	Employer id	lentification number			
		94-3289689				
Organization type (ch	eck one)					
Filers of:	Section:					
Form 990 or 990-EZ	☐ 501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundat	tion				
	☐ 527 political organization					
Form 990-PF	√ 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	eation filing Form 990, 990-EZ, or 990-PF that received, during the year, contribution or property) from any one contributor. Complete Parts I and II. See instructions for					
Special Rules						
under sections received from a	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> 3% s 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Pany one contributor, during the year, total contributions of the greater of <b>(1)</b> \$5,000 ne 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II	art II, line 13,	16a, or 16b, and that			
during the year,	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rece total contributions of more than \$1,000 exclusively for religious, charitable, scient the prevention of cruelty to children or animals. Complete Parts I, II, and III					
during the year, If this box is che purpose Do no	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rece contributions <i>exclusively</i> for religious, charitable, etc., purposes, but no such cont coked, enter here the total contributions that were received during the year for an e complete any of the parts unless the <b>General Rule</b> applies to this organization be able, etc., contributions totaling \$5,000 or more during the year	tributions tota exclusively re ecause it rece	iled more than \$1,000 ligious, charitable, etc, eived <i>nonexclusively</i>			
990-EZ, or 990-PF), bu	on that is not covered by the General Rule and/or the Special Rules does not file S t it <b>must</b> answer "No" on Part IV, line 2, of its Form 990, or check the box on line b Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of	H of its				
For Paperwork Reduction for Form 990, 990-EZ, or 9		le B (Form 990,	, 990-EZ, or 990-PF) (2016)			

Schedule B (Form 990, 990-EZ, or 990-PF) (2016) Page 2 Name of organization **Employer identification number** Oates Family Foundation 94-3289689 Part I Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed (d) (a) (c) (b) Type of No. Name, address, and ZIP + 4 **Total contributions** contribution Person See Additional Data Table **Payroll** Noncash \$ (Complete Part II for noncash contribution) (d) (a) (c) Type of No. Name, address, and ZIP + 4 Total contributions contribution Person **Payroll** Noncash \$ (Complete Part II for noncash contribution) (d) (a) (b) (c) Type of No. Name, address, and ZIP + 4 **Total contributions** contribution Person **Payroll** Noncash \$ (Complete Part II for noncash contribution) (d) (a) (b) (c) Type of Name, address, and ZIP + 4 **Total contributions** No. contribution Person **Payroll** Noncash \$ (Complete Part II for noncash contribution) (d) (a) (b) (c) Type of Name, address, and ZIP + 4 **Total contributions** No. contribution Person **Payroll** Noncash \$ (Complete Part II for noncash contribution) (d) (a) (b) (c) Type of No. Name, address, and ZIP + 4 Total contributions contribution Person **Payroll** Noncash \$ (Complete Part II for noncash

contribution)

41				
Name of organization Oates Family Foundation		Employer identification number		
	94-3289689			
' '				
(see instructions) Use duplicate copies of Part II if additional space is needed (b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
1,250 639 SH Fidelity Adv New Insights Class I	\$ 30 058	2016-12-06		
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
655 139 Sh MFS Ser Tr I Value Fd Cl 1	\$ 23 998	2016-12-06		
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
2,128 592 Sh Principal Fds Inc Mdcap Fund Instl Cl	\$ 44 625	2016-12-06		
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
1,145 203 Sh Putnam Fd Growth & Income Fund Cl Y	\$ 20 081	2016-12-06		
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
3,077 156 Sh Royce Fd Total Return Fd	\$ 39 862	2016-12-06		
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
2,219 565 Sh Wells Fargo Premier Large Co Growth Fund Cl	\$ 32 021	2016-12-06		
	Description of noncash property given  1,250 639 SH Fidelity Adv New Insights Class I  (b)  Description of noncash property given  655 139 Sh MFS Ser Tr I Value Fd Cl 1  (b)  Description of noncash property given  2,128 592 Sh Principal Fds Inc Mdcap Fund Instl Cl  (b)  Description of noncash property given  1,145 203 Sh Putnam Fd Growth & Income Fund Cl Y  (b)  Description of noncash property given  3,077 156 Sh Royce Fd Total Return Fd  (b)  Description of noncash property given	Noncash Property		

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Schedule B (Form	990, 990-EZ, or 990-PF) (2016)		Page <b>4</b>
Name of organizat Oates Family Founda			Employer identification number 94-3289689
than \$1, organiz the year	000 for the year from any one contributor	r. Complete columns (a) thro of exclusively religious, chari ctions.) ▶ \$	d in section 501(c)(7), (8), or (10) that total more ugh (e) and the following line entry. For table, etc., contributions of \$1,000 or less for
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	t Relationship of transferor to transferee
(a)			
No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	t Relationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	t Relationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	t Relationship of transferor to transferee
			Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

## **Additional Data**

**Software ID:** 16000303 **Software Version:** 2016v3.0

**EIN:** 94-3289689

Name: Oates Family Foundation

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person 🗸
<u>1</u>	PHILIP OATES		Payroll
	555 CAPITOL MALL SUITE 900	\$ 362,000	Noncash $\square$
	SACRAMENTO, CA 95814		(Complete Part II for none contribution )
			Person
<u>2</u>	PHILIP OATES		Payroll 🗌
	555 CAPITOL MALL SUITE 900	\$ 30,058	,
	SACRAMENTO, CA95814		Noncash 🗹
	SACKAMENTO, CA93614		(Complete Part II for non- contribution )
			Person 🗌
3	PHILIP OATES		Payroll 🗌
	555 CAPITOL MALL SUITE 900	\$ 23,998	Noncash 🗹
	SACRAMENTO, CA 95814		(Complete Part II for non-
			contribution )
4			Person 🗌
<u>4</u>	PHILIP OATES		Payroll 🗌
	555 CAPITOL MALL SUITE 900	\$ 44,625	Noncash 🗹
	SACRAMENTO, CA 95814		(Complete Part II for none
			contribution )
_			Person 🗌
<u>5</u>	PHILIP OATES		Payroll
	555 CAPITOL MALL SUITE 900	\$ 20,081	Noncash 🗹
	SACRAMENTO, CA 95814		
			(Complete Part II for none contribution )
			Person 🗌
<u>6</u>	PHILIP OATES		Payroll 🗌
	555 CAPITOL MALL SUITE 900	\$ 39,862	Noncash 🗹
	SACRAMENTO, CA95814		
			(Complete Part II for nonc contribution )

(a) No. Name, address, and ZIP + 4 (c) Total contributions Type of contribution

Person

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

_	PHILIP DATES	
	555 CAPITOL MALL SUITE 900	\$ 32,021
	SACRAMENTO, CA95814	

Payroll ☐ Noncash ☑

(Complete Part II for noncash contribution )