294911040 G 3 1 M No 18-0052 Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

Department of the Treasury Internal Revenue Service

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Open to Public Inspection

For c	alen	dar	year 2017 or tax	k year beginning	, 2017,	and ending		9	
н&н	_ĘV	ŒR	GREEN FOUN A FELIZ	, , , , , , , , , , , , , , , , , , , 			A B	Employer identification nur 46-5066162 Telephone number (see inst	ructions)
			S HILLS, C	A 94022		_		(650) 804-1399)
							С	If exemption application is	pending, check here
G C	heck	all	that apply:	Initial return	Initial return of a form	ner public charity	D	1 Foreign organizations, chec	ck here . ► 🗍
			Ε	Final return	Amended return			2 Foreign organizations meet	
11 C	hook	+ + +	pe of organization	Address change	Name change 1(c)(3) exempt private f	oundation (1)		here and attach computation	on •
пС				nonexempt charitable			Ε	If private foundation status	was terminated
	air ma	rket	value of all assets a	t end of year J Acc	counting method. X C			under section 507(b)(1)(A)	, check here.
		Part l	I, column (c), line 16	·	Other (specify)		F	If the foundation is in a 60	
Par	\$	Λ.	584, 651, nalysis of Re		, column (d) must be or			under section 507(b)(1)(B)	·
ran	<u></u> .	col sar	(penses (The t umns (b), (c), a	otal of amounts in nd (d) may not neces- nounts in column (a)	(a) Revenue and expenses per books	(b) Net investment income	t	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
			Contributions, gifts, grants,	, etc , received (attach schedule)	47,119,086.	, , , , ,	-		3, 232, 4
	1	2	Check ► if the foun	dation is not required to attach Sch. E		wy the time of the time of			
		3	Interest on savings and ten	nporary cash investments	7,254.	7,25		7,254.	*
			Dividends and interest from Gross rents	n securities	7,752,209.	7,752,20	<u>9.</u>	7,752,209.	3, 10
			Net rental income or (loss).	•	, , , , , , , , , , , , , , , , , , , ,				A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
en R		6 a	Net gain or (loss) from sal		12,590,763.	,			3
2018 Km>r		b	Gross sales price for assets on line 6a	^{all} 79,847,852.			_	,	÷ ×
	- 1		Capital gain net inco Net short-term capital	me (from Part IV, line 2)	**************************************	12,590,76	3.	6,533,561.	
ew U		9	Income modifications	~	C C C C C C C C C C C C C C C C C C C	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		6,333,301.	
E	1	0 a	Gross sales less returns and			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	•	- 4	To the file of
MA		b	allowances Less Cost of goods sold		7. /. // 3. **	A to the property of the said	(-1	\$	* * * * * * * * * * * * * * * * * * * *
		С	Gross profit or (loss) (atta	ch schedule)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
SCANNED MAY			Other income (attach					14 000 004	
_		_	Compensation of offi	through 11 cers, directors, trustees, etc	67,469,312. 36,000.	20,350,22		14,293,024.	24,000.
Ŵ			Other employee sala		45,000.	15,00			30,000.
	1 -	15	Pension plans, empl	•				980-SE	-
	A 1	l6a	Legal fees (attach so	chedule). ach sch) . SEE ST 1	6,000.	2,00	<u> </u>		4,000.
	M		Other professional fees (a		0,000.	2,00	<u>.</u>		1,000.
O P	N 1 S 1	17	Interest .	am.				5 2	
E	ַן ד		Taxes (attach schedule)(se	·	324,079.	319,36	9.		4,710.
	Ŷ '	19	Depreciation (attach schedule) and deplet						
Ň	• 1	20	Occupancy						
Α	E 2	21 22	Travel, conferences, Printing and publicat						
N D	X 2	23	Other expenses (atta	ach schedule)			_	E2-657	i i
	E			EE STATEMENT 3	34,192.	11,33	4.		22,858.
	S 2	24	Total operating and expenses. Add lines	13 through 23	445,271.	359,70	3.		85,568.
	· 2	25	Contributions, gifts, grants		19,812,800.		•		19,812,800.
			Total expenses and Add lines 24 and 25		20,258,071.	359,70		0.	19,898,368.
	2	27 a	Subtract line 26 from Excess of revenue of		111111111111111111111111111111111111111		7 ² ,		The state of the s
			and disbursements		47,211,241.	10 000 50	1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	The state of the s
				e (if negative, enter -0-) (if negative, enter -0-)		19,990,52	3.	14,293,024.	

E L 27 Capital stock, trust principal, or current funds
S N 28 Paid-in or capital surplus, or land, bldg, and equipment fund
C 29 Retained earnings, accumulated income, endowment, or other funds
R S 30 Total net assets or fund balances (see instructions)
31 Total liabilities and net assets/fund balances

318,045,162. 365,256,403. 318,045,162. 365,256,403. 318,045,162. 365,268,156.

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	318,045,162.
_		<u> </u>	310,043,102.
2	Enter amount from Part I, line 27a	2	47,211,241.
3	Other increases not included in line 2 (itemize)	3	
4	Add lines 1, 2, and 3	4	365,256,403.
5	Decreases not included in line 2 (itemize)	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	365, 256, 403.

Part IV Capital Gains an	d Losses for Tax on Investmen	nt Income			
(a) List and descril 2-story brick wai	be the kind(s) of property sold (for example rehouse, or common stock, 200 shares	ole, real estate, s MLC Company)	(b) How acqu P — Purcha D — Donati	se (mo, day, yr)	(d) Date sold (mo , day, yr)
la 8000SH AAPL			P	12/07/16	1/20/17
<u> b CHARLES SCHWAB - </u>		<u>, </u>	P	VARIOUS	VARIOUS
	#6982		P	VARIOUS	VARIOUS
d					
e	(Domes exists allowed	(a) Cool or other be		(h) Gain oi	r (loss)
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa	le	((e) plus (f) n	ninus (g))
a 899,35			7,939.		21,412.
<u>b</u> 59,754,619			2,466.		6,512,149.
c 19,193,880	b.	13,13	6,684.		6,057,202.
d e					
	nowing gain in column (h) and owned h	by the foundation on 12/31	/60	40.0	
	(i) Adjusted basis	(k) Excess of col. (i)		(I) Gains (Co gain minus col. (k),	i. (n) but not less
(i) FMV as of 12/31/69	as of 12/31/69	over col (j), if any		than -0-) or Losses (
a			-		21,412.
b				· · · · · · · · · · · · · · · · · · ·	6,512,149.
c		· · · · · · · · · · · · · · · · · · ·			6,057,202.
d				 	• ,,
e					·
2 Capital gain net income or	(net capital loss). If gain, also	enter in Part I, line 7 ter -0- in Part I, line 7	-	2 1	2,590,763.
3 Net short-term capital gain	or (loss) as defined in sections 1222(5	_		-	2,330,703.
If gain, also enter in Part I, in Part I, line 8	line 8, column (c) See instructions. If	(loss), enter -0-	-	3	6,533,561.
Part V Qualification Une	der Section 4940(e) for Reduce	d Tax on Net Investn	ent Inco		-,
	te foundations subject to the section 4940			N/A	
If	and the second below.				
If section 4940(d)(2) applies, leave	ve this part blank				
Was the foundation liable for the	section 4942 tax on the distributable a	amount of any year in the l	ase period	? Yes	No
If 'Yes,' the foundation doesn't qu	ualify under section 4940(e) Do not co	mplete this part.			
1 Enter the appropriate amount	in each column for each year; see the in	structions before making any	entries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as	sets	(d) Distributio (col. (b) divided	
2016					
2015					
2014				·	·
2013					
2012				· · · · · · · · · · · · · · · · · · ·	
2 Total of line 1, column (d)				2	
3 Average distribution ratio for number of years the founda	the 5-year base period – divide the total ation has been in existence if less than	on line 2 by 5.0, or by the 5 years		3	
4 Enter the net value of nonc	haritable-use assets for 2017 from Pai	rt X, line 5	-	4	
5 Multiply line 4 by line 3			-	5	
6 Enter 1% of net investment	t income (1% of Part I, line 27b)		.	6	
7 Add lines 5 and 6.			-	7	· · · · · · · · · · · · · · · · · · ·
8 Enter qualifying distribution	s from Part XII, line 4			8	
If line 8 is equal to or greater	than line 7, check the box in Part VI, line	e 1b, and complete that part	using a 1% t	ax rate See the	

	3901 (2017) HAR EVERGREEN FOUNDATION 46-500			P	age 4
Par		truction	ons)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here				
•	Date of ruling or determination letter: (attach copy of letter if necessary – see instructions)				
ь	Domestic foundations that meet the section 4940(e) requirements in Part V,		3	99,8	10.
	check here. ► ☐ and enter 1% of Part I, line 27b	,		•	1
¢	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				
_	foundations only; others, enter -0-).	-			<u>0.</u>
_	Add lines 1 and 2	-	3	99,8	10.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) .				<u>0.</u>
_	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	,	3	99,8	10.
6	Credits/Payments:	; ;	1. 3		
	2017 estimated tax pmts and 2016 overpayment credited to 2017	1.	4	* * * * * * * * * * * * * * * * * * *	1
	Exempt foreign organizations – tax withheld at source . 6b			3 3 m	4.
	Tax paid with application for extension of time to file (Form 8868) .	1 '	ا م الله الله الله الله الله الله الله الل	15.74	-
	Backup withholding erroneously withheld		· ·		
7	Total credits and payments. Add lines 6a through 6d	<u>'</u>	1	<u>58,5</u>	20.
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached.	<u>; </u>		7,0	14.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed.	,	2	48,3	04.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
11	Enter the amount of line 10 to be: Credited to 2018 estimated tax	1			
Par	VII-A Statements Regarding Activities				
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		1 a	Yes	No_X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition				
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials published		. 1b	•	X
	or distributed by the foundation in connection with the activities.				نــا
	Did the foundation file Form 1120-POL for this year?	•	1 c		X
u	(1) On the foundation \Rightarrow 0 (2) On foundation managers. \Rightarrow \$	0	F 16. 16		i
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers.		*	-	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?.		2		X
	If 'Yes,' attach a detailed description of the activities.			$\neg \neg$	
_			1		. 1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?.		4a	+	X
	If 'Yes,' has it filed a tax return on Form 990-T for this year?		4 b	N	/A
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If 'Yes,' attach the statement required by General Instruction T.		7 7	7	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		13.	30.00	200
	By language in the governing instrument, or			14.14	
			75		'' '
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col. (c), and Part XV	• •	7	$\frac{\lambda}{X}$	
	Enter the states to which the foundation reports or with which it is registered. See instructions.		 	^	
Ju	CA				
b	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G?</i> If 'No,' attach explanation		8 b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 49- for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If 'Yes,' complete Pa	42(j)(5 irt XIV	i) 9		$\frac{1}{x}$
	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names				
	and addresses		10		<u>X_</u>
BAA		F	Form 990	-PF (2	017)

_	The following regularity restricted (continued)			
11 `	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' attach schedule See instructions	11	Yes	No X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement. See instructions	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address	13	X	
14	The books are in care of ► YONG PING DUAN Telephone no ► (650)	<u>804-</u>	<u>1399</u>	
	Located at ► 27800 VIA FELIZ LOS ALTOS HILLS CA ZIP + 4 ► 94022			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here	Ņ/Ą		
	and enter the amount of tax-exempt interest received or accrued during the year		Yes	N/A No
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	,	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country	, 4	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
•	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.	٠.	Yes	No
1 4	During the year, did the foundation (either directly or indirectly)	~ ~	·	.
•	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? . Yes X No	1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	,		, ,
	disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			*, , ; }
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	۾ آھ ج 'جو	27.3 10.00	10.8
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			- (V
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.).			e e
١	b If any answer is 'Yes' to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions.	1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance, check here .		1 T	,
•	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017?	1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		** ***	7
i	a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017?	ر ا	,	1
	If 'Yes,' list the years ► 20 _ , 20 _ , 20 _ , 20	2	4	* * * * * * * * * * * * * * * * * * *
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions)	2 b	N	/A
4	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	1	2 2	3 4 1 S 4 1
	► 20 , 20 , 20 , 20	1	1.4	<i>i</i> * 1
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No		(A)	
	b If 'Yes,' did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2017.)	3 b	, ,	/7
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a	<u> </u>	/A X
f	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	46	,	X
D A A	and the second in second		O DE	

Form 990-PF (2017) H&H EVERGREEN FOUN		4720 May Bo Bos	46-50	66162	Р	age 6
Part-VII-B Statements Regarding Activiti		14/20 May be keq	uirea (continuea)		1	
5 a During the year, did the foundation pay or incur at(1) Carry on propaganda, or otherwise attempt	•	n (section 4945(e))?	☐ Yes X	No	Yes	No
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	lic election (see section	` ' '				ļ
(3) Provide a grant to an individual for travel,		purposes?	Yes X	No No		
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? See instructions	a charitable, etc , organi	zation described	Yes X	No		
(5) Provide for any purpose other than religio educational purposes, or for the preventio	us, charitable, scientific n of cruelty to children	e, literary, or or or animals?	Yes X	No		
b If any answer is 'Yes' to 5a(1)—(5), did any of described in Regulations section 53.4945 or in a case instructions	the transactions fail to current notice regarding d	qualify under the excellisaster assistance?	ptions	5 b	N N	/A
Organizations relying on a current notice rega	rding disaster assistanc	ce, check here .	•]	IN.	A
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon-	sibility for the grant?		N/A Yes	No		
If 'Yes,' attach the statement required by Regi		` '	_			
6 a Did the foundation, during the year, receive ar on a personal benefit contract?b Did the foundation, during the year, pay premi				No 6 b		X
If 'Yes' to 6b, file Form 8870	ame, an early or inches	ay, on a percental perio				
7a At any time during the tax year, was the found b If 'Yes,' did the foundation receive any procee				No 7b		
Part VIII Information About Officers, D				.,,		L
and Contractors	irectors, rrustees,	i oundation mana	gers, riigiliy i alu i	-mployee	э,	
1 List all officers, directors, trustees, and found	dation managers and th	neir compensation. See	instructions.			
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other a		
YONG PING DUAN	DIRECTOR	0.	0.			0.
LOS ALTOS HILLS, CA 94022	5.00					
XIAO YUN ZHU	DIRECTOR	36,000.	0.			0.
27800 VIA FELIZ LOS ALTOS HILLS, CA 94022	15.00	00,000				•
	No con Alexander de la colonda d	II 1	no) 16 none enter INONE	<u> </u>		
2 Compensation of five highest-paid employees (or		on line 1 – see instructio	(d)Contributions to			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expense other a	se acc allowar	ount, nces
NONE				_		
					_	
				 		
				 		
Total number of other employees paid over \$50,000) .					0

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Form 990-PF (2017) H&H EVERGREEN FOUNDATION		age 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highland Contractors (continued)	ly Paid Employees,	
3 Five highest-paid independent contractors for professional services. See instructions. If none, enter 'NO	ONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensat	ion
NONE		
~		
		
~		
~		
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of		
organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses	
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount	
1 N/A		
2		
All other program-related investments See instructions.		
•		
·		
Total. Add lines 1 through 3	>	0.
BAA	Form 990-PF (2	

Part XII Qualifying Distributions (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes. a Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1 a	19,898,368.
b Program-related investments — total from Part IX-B	. 1b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, e	tc , purposes 2	
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3 a	
b Cash distribution test (attach the required schedule)	. 3b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8; and P	'art XIII, line 4	19,898,368.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment inco Enter 1% of Part I, line 27b. See instructions	me 5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	. 6	19,898,368.

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

Form **990-PF** (2017)

Part XIII Undistributed Income (see instructions)

•		(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1	Distributable amount for 2017 from Part XI, line 7	15 mg			25,113,579.
	Undistributed income, if any, as of the end of 2017:	S. Santa Park		8 1 77 2444	20,113,373.
	a Enter amount for 2016 only b Total for prior years 20 , 20 , 20	a programme to the second seco	0	0.	
3		A ST.		S. Oak	
	From 2012 .				
	b From 2013 c From 2014 877 911			A	
	t From 2014 877, 911. d From 2015 2,518,459.		rego supragrado	A Commence	1
	From 2016 8, 219, 222.			1 12 18	·
	Total of lines 3a through e.	11,615,592.	45 th 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A 34.7	
4	Qualifying distributions for 2017 from Part XII, line 4: \$ 19,898,368.		N. Miles	Control of the state of the sta	The second of th
i	XII, line 4: \$ 19,898,368. Applied to 2016, but not more than line 2a.	· 1995年 李徽帝		0.	The state of the s
Į	Applied to undistributed income of prior years (Election required – see instructions).		0.		The state of the s
,	c Treated as distributions out of corpus (Election required – see instructions)	0.		1	
(d Applied to 2017 distributable amount.			* **	19,898,368.
	Remaining amount distributed out of corpus.	0.	1 4 5 1 4 4 1 -	ž ,	
5	Excess distributions carryover applied to 2017 (If an amount appears in column (d), the	5,215,211.	The state of the s		5,215,211.
	same amount must be shown in column (a))				
6	Enter the net total of each column as indicated below:				
i	a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	6,400,381.			· ` `
١	Prior years' undistributed income. Subtract line 4b from line 2b	Contract to	0.		3 1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
•	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0.		
•	Subtract line 6c from line 6b Taxable amount — see instructions.		0.		And the second s
(Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount — see instructions.		hy many many many many many many many man	0.	
1	Undistributed income for 2017. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018	The state of the		***	0.
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions).	0.			,
8	Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions)	0.			
9	Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	6,400,381.	Control of the second	in the second	
	Analysis of line 9:				
	Excess from 2013 Excess from 2014		The state of the s	27 1 2 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	
	Excess from 2015				Service of the servic
	Excess from 2016 . 6,400,381.	7: 17 - 17			
_	Excess from 2017	. " P d 2+	19 19		
3AA					Form 990-PF (2017)

Form 990-PF (2017) H&H EVERGREEN FO				46-506616	
Part XIV Private Operating Foundat					N/A
1 a If the foundation has received a ruling or dete is effective for 2017, enter the date of the	ruling .		•	· ·	100000
b Check box to indicate whether the foundat		rating foundation		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
each year listed			 		
c Qualifying distributions from Part XII,			 	/_/_	
line 4 for each year listed					
for active conduct of exempt activities e Qualifying distributions made directly			ļ		
for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter:					
(1) Value of all assets			<i></i>	ļ	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)			<u></u>		
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed .					
c 'Support' alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information assets at any time during the 1 Information Regarding Foundation Managers of the foundation who have close of any tax year (but only if they have YONG PING DUAN	e year — see in gers: e contributed more th	structions.)	contributions received		· · · · · · · · · · · · · · · · · · ·
b List any managers of the foundation who own a partnership or other entity) of which the NONE	10% or more of the foundation has a 1	stock of a corporati 0% or greater inte	on (or an equally large rest.	e portion of the owner	rship of
2 Information Regarding Contribution, Grant, Check here X if the foundation only marequests for funds If the foundation make 2a, b, c, and d See instructions	akes contributions to es gifts, grants, etc	preselected charitat to individuals or o	ole organizations and organizations under o	other conditions, cor	
a The name, address, and telephone number o	r email address of th	e person to whom a	pplications should be	addressed:	
b The form in which applications should be	submitted and infor	mation and materi	als they should inclu	ıde:	
c Any submission deadlines:					
d Any restrictions or limitations on awards,	such as by geograp	hical areas, charit	able fields, kinds of	institutions, or other	factors:
BAA	TEI	EA0310L 09/14/17		F	Form 990-PF (2017)

Page 11

	Grants and Contributions Paid During the Ye	ar or Approved for Fut	ure Paymen	t	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient		
	Paid during the year	1			
SEE	STATEMENT 6				
					10
				1	
]			
			•		
		li .			
			1		
			ł		
	Total			. ► 3a	19,812,800
b	Approved for future payment	T -			
			}		
			1		
			1		
			1	ĺ	

Page **12**

Enter arece	amounts unless otherwise indicated.	Unrelated	business income	Evoluded by	section 512, 513, or 514	
		(a) Business	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (See instructions.)
1 Progr	am service revenue:	ļ		code		
a	·-··	 		<u> </u>		
b		<u> </u>				
c						
d				ļl		
е						
f						
_	and contracts from government agencies					
2 Memb	bership dues and assessments					
3 Interes	t on savings and temporary cash investments			14	7,254.	
4 Divide	ends and interest from securities			14	7,752,209.	
5 Net re	ental income or (loss) from real estate:	, ,	L.			
a Debt-	financed property					
b Not d	lebt-financed property					
6 Net rer	ntal income or (loss) from personal property					
7 Other	r investment income					
8 Gain oi	r (loss) from sales of assets other than inventory			18	12,590,763.	
9 Net in	ncome or (loss) from special events					
	s profit or (loss) from sales of inventory					
	r revenue:		· ···/, · · · · · · · · · · · · · · · ·			
а						
b		<u> </u>				
c		1	<u> </u>			
d		-				
e ——						
	otal. Add columns (b), (d), and (e)			1 .	20,350,226.	
	(-), (-),				13	20,350,226.
13 Total	L. Add line 12, columns (b), (d), and (e)				13	ZU.33U.ZZU.
	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat 	ions.)			13 .	20,330,220.
(See works	sheet in line 13 instructions to verify calculat		shment of Exem	pt Purpos		20,330,220.
(See works Part XVI	sheet in line 13 instructions to verify calculat I-B Relationship of Activities to th	e Accomplis			ses	
(See works	sheet in line 13 instructions to verify calculat I-B Relationship of Activities to th	e Accomplis			ses	
(See works Part XVI Line No.	sheet in line 13 instructions to verify calculat I-B Relationship of Activities to th	e Accomplis			ses	
(See works Part XVI	sheet in line 13 instructions to verify calculat I-B Relationship of Activities to th	e Accomplis			ses	
(See works Part XVI Line No.	sheet in line 13 instructions to verify calculat I-B Relationship of Activities to th	e Accomplis			ses	
(See works Part XVI Line No.	sheet in line 13 instructions to verify calculat I-B Relationship of Activities to th	e Accomplis			ses	
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(See works Part XVI Line No.	sheet in line 13 instructions to verify calculat I-B Relationship of Activities to th	e Accomplis			ses	
(See works Part XVI Line No.	sheet in line 13 instructions to verify calculat I-B Relationship of Activities to th	e Accomplis			ses	
(See works Part XVI Line No.	sheet in line 13 instructions to verify calculat I-B Relationship of Activities to th	e Accomplis			ses	
(See works Part XVI Line No.	sheet in line 13 instructions to verify calculat I-B Relationship of Activities to th	e Accomplis			ses	
(See works Part XVI Line No.	sheet in line 13 instructions to verify calculat I-B Relationship of Activities to th	e Accomplis			ses	
(See works Part XVI Line No.	sheet in line 13 instructions to verify calculat I-B Relationship of Activities to th	e Accomplis			ses	
(See works Part XVI Line No.	sheet in line 13 instructions to verify calculat I-B Relationship of Activities to th	e Accomplis			ses	
(See works Part XVI Line No.	sheet in line 13 instructions to verify calculat I-B Relationship of Activities to th	e Accomplis			ses	
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(See works Part XVI Line No.	sheet in line 13 instructions to verify calculat I-B Relationship of Activities to th	e Accomplis			ses	
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(See works Part XVI Line No.	sheet in line 13 instructions to verify calculat I-B Relationship of Activities to th	e Accomplis			ses	
(See works Part XVI Line No.	sheet in line 13 instructions to verify calculat I-B Relationship of Activities to th	e Accomplis			ses	
(See works Part XVI Line No.	sheet in line 13 instructions to verify calculat I-B Relationship of Activities to th	e Accomplis			ses	
(See works Part XVI Line No.	sheet in line 13 instructions to verify calculat I-B Relationship of Activities to th	e Accomplis			ses	
(See works Part XVI Line No.	sheet in line 13 instructions to verify calculat I-B Relationship of Activities to th	e Accomplis			ses	

Part XVII	Information R Exempt Organ	egarding Tran		Transaction	s and Rela	tionship	s With Nonch	aritable		3
describ	e organization direction 501(control of the political organization for poli	tly or indirectly er	ngage in any of her than section	the following with 501(c)(3) organ	th any other nizations) or	organization organization 5	n 527,	-	Yes	No
	ers from the reporti		a noncharitable	evemnt organiz	ation of			, ,		
(1) Ca			a HUHCHAHRADIE	exempt organiza	ation or.			1 a (1)		X
• • •	her assets						•	1 a (2)		$\frac{x}{x}$
	transactions:						•	"".		
-	lles of assets to a n	onchazitable ever	mnt organization	,				1 b (1)	<u> </u>	X
	irchases of assets f							1 b (2)		X
	ental of facilities, eq			mzadori	•			1 b (3)	-	X
- •	embursement arran		a33013					1 b (4)		X
• •	ans or loan guarant	-		••				1 b (5)		X
• •	erformance of service		 n or fundraising	solicitations		• •	•	1 b (6)		X
• •	g of facilities, equip		-		665	•		1 c		X
any tra	answer to any of the ods, other assets, or ansaction or sharing (b) Amount involved	arrangement, sh	complete the fol he reporting four now in column (in f noncharitable exen	d) the value of the	ne goods, oth	ner assets,	vays show the fair in fair market value or services receiv sfers, transactions, an	ed.		ts
N/A	. <u>.</u>									
	 									
			<u>-</u>							
					ļ					
descril b If 'Yes	foundation directly or bed in section 501(s,' complete the folk (a) Name of organiz	c) of the Code (ot owing schedule.	ther than section		n section 527	?) Description of re	Yes	s X	No
N/A										
	er penalties of perjury, I de ect, and complete Declar	cia e that I have exami to of preparer (other t	ned this return, incluthan taxpayer) is bas	ding accompanying sized on all information	of which prepared	ements, and to has any know	the best of my knowled ledge	May the this retui preparer	IRS disc rn with the	cuss he
1 =	gnature of officer or trustee			Date	Title	PCION		See inst	Yes	No
	Print/Type preparer's		Preparer's		Da	te	Check If	PTIN	1.63	140
		•	6			_	2018 -employed		6077	
Paid	CHEN C. LE				N	IAR 1 9		P0133	09//	
Preparer	Firm's name	SY, LEE &					Firm's EIN > 95-	<u>3510881</u>		
Use Only	Firm's address	362 W GARV		1754		 -		c) 000	7200	,
		MONTEREY P	ARK, CA 91	154			Phone no (62	6) 288-		
BAA								Form 99	7U-PF	(2017)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2017

H&H EVERGREEN FOUNDATION Organization type (check one): Filers of: Form 990 or 990-EZ Section: 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated 527 political organization Form 990-PF X 501(c)(3) exempt private foundation	46-5066162 as a private foundation
Filers of: Form 990 or 990-EZ	as a private foundation
Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated 527 political organization	as a private foundation
4947(a)(1) nonexempt charitable trust not treated 527 political organization	as a private foundation
527 political organization	as a private foundation
Form 990-PF X 501(c)(3) exempt private foundation	
4947(a)(1) nonexempt charitable trust treated as	a private foundation
501(c)(3) taxable private foundation	•
Check if your organization is covered by the General Rule or a Special Rule .	
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule at	nd a Special Rule See instructions
General Rule	
Time Form 990, 990-EZ, or 990-PF that received, during the year, contribution property) from any one contributor. Complete Parts I and II See instructions for determining a co	ns totaling \$5,000 or more (in money or intributor's total contributions.
Special Rules	
For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, Imreceived from any one contributor, during the year, total contributions of the greater of (1) \$5,000 Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1 Complete Parts I and II.	6 support test of the regulations lie 13, 16a, or 16b, and that or (2) 2% of the amount on (i)
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that recoduring the year, total contributions of more than \$1,000 exclusively for religious, charitable, scient purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.	eived from any one contributor, tific, literary, or educational
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that recoduring the year, contributions <i>exclusively</i> for religious, charitable, etc., purposes, but no such con \$1,000. If this box is checked, enter here the total contributions that were received during the year charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this it received <i>nonexclusively</i> religious, charitable, etc., contributions totaling \$5,000 or more during to	itributions totaled more than or for an <i>exclusively</i> religious, organization because
Caution. An organization that isn't covered by the General Rule and/or the Special Rules doesn't file 990-PF), but it must answer 'No' on Part IV, line 2, of its Form 990; or check the box on line H of its Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, BAA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.	Form 990-EZ or on its Form 990-PF.

•		•	
	B (Form 990, 990-EZ, or 990-PF) (2017)	Page	1 of 1 of Part I
Name of orga H&H EV	PERGREEN FOUNDATION	1 ' '	identification number)66162
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space	is needed	,
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	THRIVE CHARITY		Person X Payroll
	WICKHAMS CAY II, ROAD TOWN,	\$ <u>20,146,522.</u>	Noncash
	TORTOLA, VG, 1110 BRITISH VIRGIN ISLANDS		(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	SIEMPRE CHARITY WICKHAMS CAY II, ROAD TOWN,	\$26,922,564.	Person X Payroll Noncash
	TORTOLA, VG, 1110 BRITISH VIRGIN ISLANDS	~ <u>Z0_3Z2_304.</u>	(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	DING LEI		Person X Payroll
	599 WANGSHANG ROAD,	\$50,000.	Noncash
	BINJIANG DISTRICT, HANGZHOU 310052 CHINA		(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
			nonodan continuations)

Page

1 of Part II

Employer identification number

46-5066162 H&H EVERGREEN FOUNDATION

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
N/A		 s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	·	 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	·	 	
RAA		Schedule B (Form 990, 990-E	- 000 PF) (201

of **Part III**

name o	organization	
нан	FUFRCRFFN	FOUNDATION

Employer identification number 46-5066162

rant III	or (10) that total more than \$1,000 for the following line entry. For organizations contributions of \$1,000 or less for the year. (Use duplicate copies of Part III if additional states.)	e year from any one contribute mpleting Part III, enter the total o Enter this information once. See i space is needed.	f <i>exclusively</i> religious, charitable, etc., instructions.) ▶ \$N/A
(a) No. from Part i	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		
-			
	Transferee's name, address	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address	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	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	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee
	<u></u>		

2017	FEDERAL STATEMENTS	PAGE 1
CLIENT 6702	H&H EVERGREEN FOUNDATION	46-5066162
3/13/18 STATEMENT 1 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES		04.23PM
ACCOUNTING FEES	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME \$ 6,000. \$ 2,000. TOTAL \$ 6,000. \$ 2,000. \$ 0.	\$ 4,000.
STATEMENT 2 FORM 990-PF, PART I, LINE 18 TAXES		
FEDERAL TAX (2016) FEDERAL TAX (2017) TAXES ON PAYROLL	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME \$ 158,494. \$ 158,494. 158,520. 158,520. 7,065. 2,355. TOTAL \$ 324,079. \$ 319,369. \$ 0.	(D) CHARITABLE PURPOSES \$ 4,710. \$ 4,710.
STATEMENT 3 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES		
ATTORNEY GENERAL'S REGISTRY FEDERAL TAX PENALTY INSURANCE OFFICE EXPENSE PAYROLL TAXES PANALTY STATE ANNUAL FEE	\$ 300. 60. \$ 60. 33,468. 11,156. 65. 22. 289. 96.	(D) CHARITABLE PURPOSES \$ 300. 22,312. 43. 193. 10. \$ 22,858.
STATEMENT 4 FORM 990-PF, PART II, LINE 15 OTHER ASSETS		!
TRANSPORT JET TRANSPORT JET	BOOK VALUE \$ \$ 2,295,018. \$ TOTAL \$ 2,295,018. \$	FAIR MARKET VALUE 2,295,018.

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2017	FEDERAL STA	PAGE 2		
CLIENT 6702	H&H EVERGREEN	46-5066162		
3/16/18				10·31AM
STATEMENT 5 FORM 990-PF, PART II, LINE 22 OTHER LIABILITIES				
PAYROLL TAXES PAYABLE. ACCRUED PAYROLL		••	\$	938. 10,815.
			TOTAL \$	11,753.
STATEMENT 6 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YE	AR			
NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMQUNT
LUCILE PACKARD CHILDREN'S			CHARITY &	\$ 1,000,000
FUND 400 HAMILTON AVE. #340 PALO ALTO CA 94301			MEDICAL	
DUNHUANG FOUNDATION INC 140 E. 62ND STREET NEW YORK NY 10065		501 (C) (3)	ARTS, CULTURE AND HUMANITIES	10,000
ROBERT F. KENNEDY HUMAN RIGHTS 515 MADISON AVENUE #718 NEW YORK NY 10022		501(C)(3)	CHARITY & HUMAN RIGHT	500,000
SEQUOIA HOSPITAL FOUNDATION 170 ALAMEDA DE LAS PULGAS REDWOOD CITY CA 94062		501 (C) (3)	MEDICAL	5,000
EAST PALO ALTO POLICE DEPARTMENT 141 DEMETER STREET EAST PALO ALTO CA 94303		501 (C) (3)	PUBLIC SAFETY	50,000
CHINESE AMERICAN COALITION PO BOX 276 CUPERTINO CA 95015		501 (C) (3)	MEDICAL & CHARITY	10,000
CARE MISSION USA 362 W. GARVEY AVE. MONTEREY PARK CA 91754		501 (C) (3)	CHARITY	10,000
LELAND STANFORD JUNIOR UNIVERSITY 326 GALVEZ STREET STANFORD CA 94305		501 (C) (3)	EDUCATION AND MEDICAL	12,425,000
AVENIDAS BRYANT ST CAPITAL CAMPAIGN 450 BRYANT STREET		501 (C) (3)	CHARITY	500,000

.

2017	FEDERAL STA	TEMENTS	6	PAGE 3
CLIENT 6702	H&H EVERGREEN	46-5066162		
3/16/18		 ''' .		10 31AM
STATEMENT 6 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEA	NR			
NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
NICKLAUS CHILDREN'S HEALTH CARE FD 11770 US HIGHWAY ONE, SUITE 308 NORTH PALM BEACH FL 33408		501 (C) (3)	MEDICAL	\$ 1,000,000.
UCSF 220 MONTGOMERY STREET, 5TH FLOOR SAN FRANCISCO CA 94143		501 (C) (3)	EDUCATION AND MEDICAL	1,000,000.
ZHEDA ALUMNI FOUNDATION 1161 DONINGTON DR. SAN JOSE CA 95129		501 (C) (3)	EDUCATION	17,800.
UNIVERSITY OF CALIFORNIA, LOS ANGELES 650 CHARLES E. YOUNG DR. SOUTH LOS ANGELES CA 90095		501 (C) (3)	EDUCATION AND MEDICAL	160,000.
ETHIOPIA ACT PO BOX 11751 KNOXVILLE TN 37939		501 (C) (3)	CHARITY	100,000.
FRIENDS OF THE OAKLAND PUBLIC LIBRARY 721 WASHINGTON ST. OAKLAND CA 94607		501 (C) (3)	CHARITY & CULTURE	50,000.
GLIDE FOUNDATION 330 ELLIS STREET SAN FRANCISCO CA 94102		501 (C) (3)	CHARITY	2,700,000.
CHARITY BUZZ 437 FIFTH AVENUE, 11TH FLOOR NEW YORK NY 10016		501 (C) (3)	CHARITY	255,000.
CHILDREN HOSPITAL OF LA 4650 SUNSET BLVD., #32 LOS ANGELES CA 90027		501 (C) (3)	MEDICAL & CHARITY	20,000.

TOTAL \$ 19,812,800.