Form 990-PF

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

2017

Department of the Treasury Internal Revenue Service

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Open to Public Inspection

For cale	endar year 2017 or tax year beginning	, 2017,	and ending		,	
Cuar	ini Legacy Corporation			Α	Employer identification num 82-3571433	nber
~71 Īı	ncline Green Lane			В	Telephone number (see inst	ructions)
Alamo	o, CA 94507					
				С	If exemption application is	pending, check here X
G Che	ck all that apply: X Initial return	Initial return of a form	ner public charity	D	1 Foreign organizations, chec	k here
	Final return	Amended return				
	Address change	Name change			2 Foreign organizations meet here and attach computation	
H Che	ck type of organization: X Section 501 Section 4947(a)(1) nonexempt charitable true	(c)(3) exempt private for	oundation private foundation	Ε	If private foundation status	was terminated
I Fair	<del></del>	ounting method: X C		-	under section 507(b)(1)(A)	, check here
(fron		Other (specify)		F	If the foundation is in a 60-	-month termination —
<b>►</b> \$		column (d) must be on	cash basis.)	<u> </u>	under section 507(b)(1)(B)	
Part I	Analysis of Revenue and Expenses (The total of amounts in	(a) Revenue and	(b) Net investmen	nt	(c) Adjusted net	(d) Disbursements
	columns (b), (c), and (d) may not neces-	expenses per books	income		income	for charitable purposes
	sarily equal the amounts in column (a) (see instructions).)					(cash basis only)
	1 Contributions, gifts, grants, etc., received (attach schedule)	368,480.				
	2 Check ► if the foundation is not required to attach Sch. B					
	3 Interest on savings and temporary cash investments .				_	
	4 Dividends and interest from securities.					
	5 a Gross rents b Net rental income					
	or (loss)  6 a Net gain or (loss) from sale of assets not on line 10					
E V E N U	b Gross sales price for all assets on line 6a 28,994.					
Ė	7 Capital gain net income (from Part IV, line 2)  8 Net short-term capital gain					
	9 Income modifications		***************************************	<del></del>		<u> </u>
E	10 a Gross sales less returns and	······································				
	allowances.	· · · · · · · · · · · · · · · · · · ·				<u> </u>
	c Gross profit or (loss) (attach schedule)					<u> </u>
	1 !				<del> </del>	
_	11 Other income (attach schedule)					
<u></u>	12 Compensation of officers, directors, trusces, etc	368,480. 0.		0.	0.	
	14 Other employee salaries and wages					
7	14 Other employee salaries and wages 15 Pension plans employee benefits.					
A D	16a Legal fees (attach schedule).  b Accounting fees (attach sch) See St 1	4 000			<del> </del>	
M I N	b Accounting fees (attach sch) See St I  c Other professional fees (attach sch)	4,800.		_	<del>                                     </del>	
(O)	17 Interest			-		
P S E T R B	18 Taxes (attach schedule)(see instrs) See Stm 2	25.				
ÄÄ	19 Depreciation (attach schedule) and depletion .					
N V G E	20 Occupancy					
_	21 Travel, conferences, and meetings 22 Printing and publications			_		
A E N X D P	23 Other expenses (attach schedule)	· · · · · · · · · · · · · · · · · · ·		-	<del> </del>	
E	See Statement 3	2,400.				
S	24 Total operating and administrative expenses. Add lines 13 through 23	7,225.				
S	25 Contributions, gifts, grants paid Part XV	16,000.				16,000.
	26 Total expenses and disbursements.				_	
	Add lines 24 and 25  27 Subtract line 25 from line 12:	23,225.	ļ	0.	0.	16,000.
	a Excess of revenue over expenses	245 255				•
	and disbursements  D Net Investment Income (if negative, enter -0-).	345,255.		0.	-	
	C Adjusted net income (if negative, enter -0-)			<u> </u>	0.	1

Pari	II	Balance Sheets column should be for end-of-year amounts only (See instructions)		Eriu o	
		(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing		11,769.	11,769.
	2	Savings and temporary cash investments		······································	
	3	Accounts receivable		, ,	
		Less; allowance for doubtful accounts		······································	
	4	Pledges receivable	1		
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions).			
	7	Other notes and loans receivable (attach sch)	· · · · · · · · · · · · · · · · · · ·	, <del>, , , , , , , , , , , , , , , , , , </del>	, , , , , , , , , , , , , , , , , , ,
A		Less: allowance for doubtful accounts			ļ ,
S	8	inventories for sale or use			
Ě	9	Prepaid expenses and deferred charges	<del></del>		<del></del>
A S E T S	10	a Investments – U.S. and state government			
		obligations (attach schedule) b Investments — corporate stock (attach schedule) Statement 4		222 400	225 276
		c Investments — corporate bonds (attach schedule)		333,486.	335,376.
		,			
	"	Investments – land, buildings, and equipment: basis			<u> </u>
		Less: accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule)			
	15	Other assets (describe ►	- )		
	16	Total assets (to be completed by all filers — see the instructions. Also, see page 1, item i)	0.	345,255.	347,145.
Ļ	17	Accounts payable and accrued expenses .			
Å	18	Grants payable		·	<b>1</b>
A B	19	Deferred revenue			1
Ľ	20	Loans from officers, directors, trustees, & other disqualified persons			
Ţ	21	Mortgages and other notes payable (attach schedule)		- <del></del>	1
ł	22	Other liabilities (describe ►	)		
E S	22	Total liabilities (add lines 17 through 22)	-		]
	23		0.	0.	-
		and complete lines 24 through 26, and lines 30 and 31.	X		<b>[</b>
NF	24	Unrestricted .		345,255.	]
N F E U T N	25	Temporarily restricted .			<u>}</u>
D	26	Permanently restricted .			]
A B A L T A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
ĔĹ	27	Capital stock, trust principal, or current funds			
S N C	28	Paid-in or capital surplus, or land, bldg, and equipment fund .			1
O E	29	Retained earnings, accumulated income, endowment, or other funds			
R S	30	Total net assets or fund balances (see instructions)	0.	345,255.	
	31	Total liabilities and net assets/fund balances (see instructions)	0.	345,255.	
Par	FIII	Analysis of Changes in Net Assets or Fund Ba			<u> </u>
		al net assets or fund balances at beginning of year – Part II,		ee with	T
•	end-	of-year figure reported on prior year's return)	(-y, ( <b>a</b> gi	1	0.
2		er amount from Part I, line 27a		2	345,255.
3		increases not included in line 2 (itemize)		3	
4		lines 1, 2, and 3 .	•	4	345,255.
5		eases not included in line 2 (itemize)		5	<del> </del>
6	Tota	al net assets or fund balances at end of year (line 4 minus lin	ie 5) – Part II, column (b), line	e 30 <b>6</b>	345,255.

a Baycom Corp b c d e (e) Gross sales price  28,994.	(f) Depreciation allowed (or allowable)	(g) Cost or other basi	P	12/26/17	12/26/1
c d e (e) Gross sales price a 28,994.	(f) Depreciation allowed (or allowable)	(r) Cost or other base			
d e (e) Gross sales price a 28,994.	(f) Depreciation allowed (or allowable)	(r) Cost or other base			
e (e) Gross sales price a 28,994.	(f) Depreciation allowed (or allowable)	(a) Cost or other base			
(e) Gross sales price a 28,994.	(f) Depreciation allowed (or allowable)	(a) Cost or other base		1	
a 28,994.	(or allowable)		-	(h) Gain or	(loss)
		plus expense of sale		((e) plus (f) n	
b		28	,994.		
<del>-</del>					
С					
d					
e					
	ing gain in column (h) and owned by			(I) Gains (Col. gain minus col. (k), b	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		than -0-) or Losses (fr	
8	<del>                                     </del>				
b					
С					
d					
е					
2 Capital gain net income or (net		enter in Part I, line 7 er -0- in Part I, line 7		2	
Net short-term capital gain or (	loss) as defined in sections 1222(5) a		F		
If gain, also enter in Part I, line in Part I, line	e 8, column (c). See instructions. If (l	oss), enter -0-		3	
art V Qualification Unde	r Section 4940(e) for Reduce	d Tax on Net Investm	ent Inco	me	
Yes,' the foundation doesn't qualif	tion 4942 tax on the distributable am	plete this part.		Yes	☐ No
<del></del>	n each column for each year; see the	e instructions before making	g any entri		
(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	(c) Net value of noncharitable-use asse	ets	(d) Distribution (col. (b) divided	
2016					
2015					
2014					
2013	<del> </del>				
2012	L		<del></del>		
2 Total of line 1, column (d)			1	2	
3 Average distribution ratio for th	ne 5-year base period — divide the to n has been in existence if less than 5		ne T	3	
•	itable-use assets for 2017 from Part 2	•		4	
				5	
5 Multiply line 4 by line 3	•				
- 1,	ome (1% of Part I, line 27b)			6	
6 Enter 1% of net investment inc	ome (1% of Part I, line 27b)			6	
				6 7 8	

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Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instruction	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)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V,			0.	
	check here. ► and enter 1% of Part I, line 27b				
C	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-)			0.	
3	Add lines 1 and 2			0.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0.	
6	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0.  Credits/Payments:	*********		0.	
٠,	2017		, ,	m nyar	
	Exempt foreign organizations — tax withheld at source.			,	
	Tax paid with application for extension of time to file (Form 8868)  6c	,	•		
	Backup withholding erroneously withheld  6d				
7	Total credits and payments. Add lines 6a through 6d.			0.	
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here If Form 2220 is attached				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0.	
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				
Par	t VII-A   Statements Regarding Activities				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Ye	s No	
1 4	participate or intervene in any political campaign?	1		X	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1	ь	X	
	If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.				
	Did the foundation file Form 1120-POL for this year?	1	c	X	
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation	<u>0.</u>			
	foundation managers , >\$ 0.				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	1	x	
	If 'Yes,' attach a detailed description of the activities.			<del> </del>	
2	Has the foundation made any changes, not previously reported to the IPS, up its governing instrument, articles				
•	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	1	X	
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4	a	Х	
b	If 'Yes,' has it filed a tax return on Form 990-T for this year?	4	b	N/A	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X	
	If 'Yes,' attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or				
	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		Х	
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	1		
	Enter the states to which the foundation reports or with which it is registered. See instructions		+-	-	
	N/A				
b	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
	(or designate) of each state as required by General Instruction G? If 'No,' attach explanation	ļ	b >		_
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If 'Yes,' complete Part XIV	9		x	1
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names		1		
	and addresses	10		X	
BAA		Form 9	90-P	<b>F</b> (2017)	

Рa	rt VII-A Statements Regarding Activities (continued)	- 02	337145	<u> </u>		-3	
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		ied persoi	n had				
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption	annlıcatı	nn?	12	X	X	
	Website address ► N/A						
14	The books are in care of ▶ George Guarini Telephor	e no. ►					
15	Located at > 71 Incline Green Lane Alamo CA ZIP + 4	945	07	 _N/A			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here and enter the amount of tax-exempt interest received or accrued during the year						
16	- ·	L	15		Yes	N/A No	
10	At any time during calendar year 2017, did the foundation have an interest in or a signature or other at bank, securities, or other financial account in a foreign country?	ithority ov	er a	16	165	X	
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country ▶			, ,			
Pa	rt VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			<u>-t</u>			
7	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.				Yes	No	
1 4	a 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				
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	☐Yes	XNo				
	(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?	Yes	ΧNο				
	(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	XNo				
	(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.)	Yes	XNo				
ı	b If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> 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	•	· 🔲				
•	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		Х	
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)):						
4	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?	Yes	XNo				
	If 'Yes,' list the years ▶ 20 , 20 , 20 , 20	_	_				
ı	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942( crelating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942( and attack part that the provision of assets) to the year's undistributed income?	a)(2) a)(2) to					
	all years listed, answer 'No' and attach statement – see instructions.)  If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years h	0.0		2 b	N	/A	
	> 20 , 20 , 20 , 20 , 20	c: <b>c</b> .					
3 8	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				
ŀ	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)(/)) 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.)	Ш	E	3 b	N	/A	
4 8	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4 a		Х	
ł	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?						
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						//	

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Part VII-B   Statements Regarding Activit		n 4720 May Be Red	uired (continued)					
5a During the year, did the foundation pay or incu	•			<u> </u>	Yes	No		
(1) Carry on propaganda, or otherwise attemp	t to influence legislation	(section 4945(e))?	Yes X	No				
(2) Influence the outcome of any specific publion, directly or indirectly, any voter registra	tion drive?	•		No				
(3) Provide a grant to an individual for travel,	study, or other similar p	urposes?	Yes X	No	1			
(4) Provide a grant to an organization other th in section 4945(d)(4)(A)? See instructions	an a charitable, etc., or	ganization described	Yes X	No				
(5) Provide for any purpose other than religious educational purposes, or for the prevention			Yes X	No	,			
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53.4945 or in See instructions		qualify under the excepting disaster assistance?	ons . , .	. 5 b	N	 / A		
Organizations relying on a current notice regarding disaster assistance, check here.								
c If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  N/A Yes No								
If 'Yes,' attach the statement required by Regu	lations section 53.4945-	-5(d).		' <b>[</b>				
6 a Did the foundation, during the year, receive an on a personal benefit contract?				No				
<b>b</b> Did the foundation, during the year, pay premi	ums, directly or indirect	ly, on a personal benefi	t contract?	6 b	<u> </u>	X		
If 'Yes' to 6b, file Form 8870.  7a At any time during the tax year, was the found	ation a party to a probit	uted tay chalter transac	tion? Yes X	No				
<b>b</b> If 'Yes,' did the foundation receive any proceed				N/A 76				
Part VIII Information About Officers, Dire					1	<b></b>		
and Contractors			,	-,,				
1 List all officers, directors, trustees, and found	ation managers and the	ir compensation. See in	structions.					
(a) Name and address  (b) Title, and average hours per week devoted to position  (c) Compensation (d) Contributions to employee benefit plans and deferred compensation								
George Guarini	President &	0.	0.			0.		
71 Incline Green Lane	0							
Alamo, CA 94115		<u></u>	ļ <u>.</u>	ļ				
			<u> </u>	<del> </del>		—–		
2 Compensation of five highest-paid employees	(other than those inclu	ided on line 1 - see ins	tructions). If none, ent	er 'NONE.'				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Exper	se aco allowa	count, nces		
None								
				1				
				<del> </del>				
	<u> </u>	<del> </del>	}	<del> </del>				
	1			}				
				<b></b>				
				<u> </u>				
			<u> </u>					
Total number of other employees paid over \$50,000	<del> </del>	<u> </u>	<u> </u>	-		0		
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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors (continued)	Paid Employees,
3 Five highest-paid independent contractors for professional services. See instructions. If none, enter 'NO	DNE.'
(a) Name and address of each person paid more than \$50,000 (b) Type of service	ce (c) Compensation
None	
<del></del>	
	Ì
	ł
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 organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	
<b>*</b>	
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.	
2	
·	
Total. Add lines 1 through 3	_0.
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Part X   Minimum Investment Return (All domestic foundations must complete this part. see instructions.)	Foreign founda	ations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes a Average monthly fair market value of securities	1 a	
<b>b</b> Average of monthly cash balances	1 b	
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	0.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)		
2 Acquisition indebtedness applicable to line 1 assets .	2	
3 Subtract line 2 from line 1d	3	
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	0.
6 Minimum investment return. Enter 5% of line 5.	6	0.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private op and certain foreign organizations, check here \( \bigcirc \) and do not complete this part.	erating foundat )	ions
1 Minimum investment return from Part X, line 6 .	1	
2 a Tax on investment income for 2017 from Part VI, line 5		
b Income tax for 2017. (This does not include the tax from Part VI.) .	7 1	
c Add lines 2a and 2b	2 c	
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	
4 Recoveries of amounts treated as qualifying distributions .	4	
5 Add lines 3 and 4	5	
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	0.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		16 000

a Expenses, contributions, gits, etc. — total from Part I, column (d), line 26	la	16,000.
<b>b</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, etc., 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)	3 b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	16,000.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	16,000.

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.

BAA

Form **990-PF** (2017)

## Part XIII Undistributed Income (see instructions)

	<b>(a)</b> Corpus	(b) Years prior to 2016	<b>(c)</b> 2016	<b>(d)</b> 2017
Distributable amount for 2017 from Part XI, line 7				0.
2 Undistributed income, if any, as of the end of 2017:				· ·
a Enter amount for 2016 only	,		0.	
<b>b</b> Total for prior years. 20 , 20 , 20		0.		,
3 Excess distributions carryover, if any, to 2017				,
a From 2012 .		,		,
<b>b</b> From 2013	i a a action		Commence of	
c From 2014	3 3	" / "		" many age to the
<b>d</b> From 2015	12.3	, , , ,		11 6 3 1
e From 2016			, , ,	,
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2017 from Part				
XII, line 4: \$ 16,000.			•	
a Applied to 2016, but not more than line 2a			0.	
<ul> <li>Applied to undistributed income of prior years (Election required — see instructions)</li> </ul>		0.		
c Treated as distributions out of corpus (Election required – see instructions)	0.			
d Applied to 2017 distributable amount.				0.
e Remaining amount distributed out of corpus	16,000.			
5 Excess distributions carryover applied to 2017	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as				
indicated below:				<u> </u>
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	16,000.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed				
income for which a notice of deficiency has been issued, or on which the section 4942(a)				1
tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				<del>-</del>
amount – see instructions		0.		
e Undistributed income for 2016. Subtract line 4a from				Ī
line 2a. Taxable amount — see instructions			0.	1
f Undistributed income for 2017. Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2018				0.
7 Amounts treated as distributions out of				
corous to satisfy requirements imposed by				1
section 170(b)(1)(F) or 4942(g)(3) (Election may be required – see instructions).	0.			1
• •	<del>·</del>			
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	16,000.			-
10 Analysis of line 9:				
a Excess from 2013	1			1
b Excess from 2014	1			1
c Excess from 2015	_			1
d Excess from 2016	4			1
e Excess from 2017 16,000.		<u> </u>	<u> </u>	<u> </u>

orm 990-RF (2017) Guarini Legacy C	orporation	<del></del>		82-3571433	
Part XIV   Private Operating Founda					N/A
1 a If the foundation has received a ruling or one is effective for 2017, enter the date of the	ruling		_		V 40.40(4)(E)
b Check box to indicate whether the foundar		aung toundation de		4942(J)(3) or	<u>/</u> 4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	4-> 2016	Prior 3 years	1 (1) 2014	(e) Total
investment return from Part X for each year listed.	(a) 2017	<b>(b)</b> 2016	(c) 2015	(d) 2014/	
<b>b</b> 85% of line 2a			<del> </del>	<del>                                     </del>	
c Qualifying distributions from Part XII,				<del>  / -  </del>	
line 4 for each year listed				/	
d Amounts included in line 2c not used directly for active conduct of exempt activities			1	1	
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities.</li> <li>Subtract line 2d from line 2c</li> </ul>					
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test - enter:					
(1) Value of all assets			1		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter:					
<ol> <li>Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)</li> </ol>					
(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				<del>                                     </del>	
(4) Gross investment income	(		1	<del>   </del>	
art XV Supplementary Information assets at any time during t	ı (Complete this he year – see in	part only if the estructions.)	foundation h	ad \$5,000 or mor	e in
Information Regarding Foundation Managera List any managers of the foundation who close of any tax year (but only if they have None	nave contributed mo	re than 2% of the to han \$5,000). (See s	otal contributions resection 507(d)(2).)	eceived by the founda	ation before the
<b>b</b> List any managers of the foundation who a partnership or other entity) of which the None	own 10% or more of foundation has a 10	the stock of a corp % or greater interes	oration (or an equa st.	ally large portion of th	e ownership of
2 Information Regarding Contribution, Grancheck here ► X if the foundation only requests for funds. If the foundation make 2a, b, c, and d. See instructions.	makes contributions	to preselected char	itable organization	s and does not accep	it unsolicited olete items
a The name, address, and telephone numb	er or email address	of the person to wh	om applications sh	ould be addressed:	
b The form in which applications should be	submitted and inform	nation and material	s they should inclu	de:	
c Any submission deadlines:					
d Any restrictions or limitations on awards,	such as by geograph	nical areas charitat	ole fields kinds of	institutions or other f	actors:
and the state of t	<u></u> 5, goog ap	a. Jao, criaritat	nordo, ninus Ul	mondations, or outer to	2010101

3	3 Grants and Contributions Paid During the Year or Approved for Future Payment								
	Recipient		Foundation status of recipient	Purpose of grant or contribution	Amount				
	Name and address (home or business)	or substantial contributor	recipient						
	Paid during the year								
See	Statement 5								
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	Total	<u> </u>	<del></del>	► 3a	16,000.				
b	Approved for future payment		<del>j</del>	T	10,000.				
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	Total	, ,		► 3b	·				

er gross amounts unless otherwise indicated.		Unrelated business income Ex			section 512, 513, or 514	(e)	
Progra	am service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	<b>(d)</b> Amount	Related or exemp function income (See instructions	
a	,	}	<del></del>	-		<del>                                     </del>	
	<del></del>	<del> </del>	<del></del>	<del>  -</del>		<del>                                     </del>	
- -	<del></del>	<del> </del>	<del></del>	<del> </del>	<del></del>	<del> </del>	
d ———	<del></del>	<del> </del>	<del></del>	<del> </del>		<del> </del>	
e		+	<del></del>	<del>    -</del>		<del></del>	
;				<del>    -</del>		<del></del>	
Food	and contracts from government agencies	<del></del>	<del></del>	<del>}                                </del>		<del> </del>	
-	ership dues and assessments.	<del> </del>	<del></del>	<del>}</del> -		<del> </del>	
	•	<del> </del>	<del></del>	<del>}</del> -		<del></del>	
	on savings and temporary cash investments	<del> </del>		<del> </del>		<del></del>	
				<del>  </del>		,	
	ntal income or (loss) from real estate:		em e anta ce a	<del>                                     </del>	, , , , , , , , , , , , , , , , , , ,	*	
	inanced property	<b></b>	<del></del>	<del> </del>	- <del></del>	<b> </b>	
	ebt-financed property ,	<b></b>		<del>                                     </del>		<u> </u>	
	al income or (loss) from personal property			<b></b> _			
	investment income			<u> </u>			
	(loss) from sales of assets other than inventory						
	come or (loss) from special events		· · · · · · · · · · · · · · · · · · ·				
Gross	profit or (loss) from sales of inventory						
Other	revenue:						
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d		<del>}</del>	!	<del>   -</del>			
d e Subtot							
e Subtot	tal. Add columns (b), (d), and (e)				13		
e Subtot	tal. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	ns.)			13		
Subtot Total.	tal. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation		shment of Fxemp	t Purpos			
Subtot Total. worksh	tal. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	Accompl	<del></del>		es	o the	
Subtot Total. worksh	tal. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	e Accompl	ted in column (e) of Pai	rt XVI-A cor	es	to the tructions.)	
Subtot Total. worksh tt XVI-	tal. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	e Accompl	ted in column (e) of Pai	rt XVI-A cor	es	to the tructions.)	
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Subtot Total. worksh	tal. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	e Accompl	ted in column (e) of Pai	rt XVI-A cor	es	to the (ructions.)	
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Subtot Total. worksh	tal. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	e Accompl	ted in column (e) of Pai	rt XVI-A cor	es	to the gructions.)	
Subtot Total. worksh	tal. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	e Accompl	ted in column (e) of Pai	rt XVI-A cor	es	to the cructions.)	
Subtot Total. worksh	tal. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	e Accompl	ted in column (e) of Pai	rt XVI-A cor	es	to the pructions.)	

Form 990-RF (2017) Guarini Legacy Corporation 82-3571433

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

										Yes	No
d	escribed	rganization directl d in section 501(c) o political organiza	of the Code (ot	ngage in any of the her than section 50	e following with 01(c)(3) organiz	any other org ations) or in	ganization section 527,			ies	NU
	•			a noncharitable ex	empt organizati	on of:					
	) Cash	•	_		,				1 a (1)	1	X
(2	) Other	assets							1 a (2)		X
<b>b</b> O	ther tra	nsactions:									••••••
(1	) Sales	of assets to a no	oncharitable exe	mpt organization.					1 b (1)	1	X
(2	) Purcl	nases of assets fro	om a noncharita	ble exempt organi	zation				1 b (2)		X
(3	n) Renta	al of facilities, equ	ipment, or other	r assets					1 b (3)		X
(4	) Reim	bursement arrang	jements						1 b (4)		<u>X</u>
(5	) Loan	s or Ioan guarante	ees		٠				. 1 b (5)		<u>X</u>
•	•			ip or fundraising so		•			1 b (6)		<u>X</u>
c S	haring o	of facilities, equipr	ment, mailing lis	ts, other assets, or	r paid employee	S			. <u>1 c</u>		<u>X</u>
<b>d</b> If tr a	the ans ne good ny trans	swer to any of the s, other assets, or action or sharing	above is 'Yes,' r services given arrangement, si	complete the follow by the reporting for now in column (d)	wing schedule. ( oundation, If the the value of the	Column <b>(b)</b> si foundation r goods, othe	hould always eceived less to r assets, or se	show the fair r than fair marke ervices receive	market value et value in ed.	e of	
(a) Line	no	(b) Amount involved	(c) Name	of noncharitable exempt	organization	(d) Descr	iption of transfer	s, transactions, an	d sharing arran	gements	5
N/A											
				·							
				<u> </u>							
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	+	<del></del>	<del></del>					<del></del>			
0 - 1-											
2 <b>a</b> 15	s ine fol escribed	undation directly o d in section 501(c)	r indirectly aπilia of the Code (of	ated with, or relate ther than section 5	a to, one or mo 01(c)(3)) or in s	re tax-exemp ection 527?	ot organizatioi	าร	∏Ye	s X	No
		complete the follow	•						i L		
	(a)	Name of organiza	ation	<b>(b)</b> Type (	of organization		(c) D	escription of re	elationship		
N/A											
	Under pe	naities of perjury, I decla	re that I have examine	d this return, including according than taxpayer) is based	companying schedules	and statements,	and to the best of n	ny knowledge and b	elief, it is true,		
Sign		•	11				,	•	May the	IRS disc	uss
Here						Pres	sident &	CEO	this retu preparer	shown b	elow <sup>7</sup>
	Signat	ure of officer or trustee			Date	Title	staent a	<u> </u>	Seèınsi X	ructions Yes	□ <sub>No</sub>
	1	Print/Type preparer's	name	Preparer's si	gnature	Date	<del></del>	Check If	OTOL		لتب
Paid		Mark Franc	is	Mark F	rancis M	12: 3	12/18	self-employed	P0021	9854	
Prepa	arer	Firm's name	Lapidos L				<del></del>		3084697		
Use (		Firm's address	2424 PINE		,	<del></del>			2004001		
	· · · · <del>y</del>		SAN FRANC		L15		Ph	one no (4]	L5) 292 <b>-</b>	2424	1
ВАА		·				<del></del>			Form <b>9</b>		
										•	/

#### 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.lrs.gov/Form990 for the latest information. OMB No 1545-0047

2017

Name of the organization		Employer identification number
Guarini Legacy Corporation		82-3571433
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a p	private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a priva	ite foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the Ger	neral Rule or a Special Rule.	
Note. Only a section 501(c)(7), (8), or (10) organ	nization can check boxes for both the General Rule and a Sp	ecial Rule. See instructions.
General Rule		
X For an organization filing Form 990, 990-EZ,	or 990-PF that received, during the year, contributions total	ing \$5,000 or more (in money or
property) from any one contributor. Complet	e Parts I and II. See instructions for determining a contributo	or'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% suppo ), that checked Schedule A (Form 990 or 990-EZ), Part II, Iir	rt test of the regulations
received from any one contributor, during th	e year, total contributions of the greater of (1) \$5,000 or (2): -EZ, line 1. Complete Parts I and II.	2% of the amount on (i)
Form 990, Part VIII, line In; or (ii) Form 990	-EZ, line 1. Complete Parts I and II.	
For an organization described in section 501	(c)(7), (8), or (10) filing Form 990 or 990-E7 that received from	om any one contributor.
during the year, total contributions of more t	(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from \$1,000 exclusively for religious, charitable, scientific, lite children or animals. Complete Parts I, II, and III.	erary, or educational
purposes, or for the prevention of cruenty to	cilidren of animals. Complete Farts 1, 11, and 111.	
For an organization described in section 501	(c)(7), (8), or (10) filing Form 990 or 990-EZ that received fro	om env ene contributor
	religious, charitable, etc., purposes, but no such contributio	
\$1,000. If this box is checked, enter here the	e total contributions that were received during the year for ar	n <i>exclusively</i> religious,
charitable, etc., purpose. Don't complete any	y of the parts unless the <b>General Rule</b> applies to this organize, e, etc., contributions totaling \$5,000 or more during the year	zation because
it received nonexclusively rengious, charitable	e, etc., contributions totaling \$5,000 or more during the year	
Caution. An organization that isn't covered by th	e General Rule and/or the Special Rules doesn't file Schedu	ıle B (Form 990, 990-EZ, or
990-PF), but it <b>must</b> answer 'No' on Part IV. line	2, of its Form 990; or check the box on line H of its Form 99 ling requirements of Schedule B (Form 990, 990-EZ, or 990-	90-EZ or on its Form 990-PF.
BAA For Paperwork Reduction Act Notice, see the Instruc		3 (Form 990, 990-EZ, or 990-PF) (2017)

Name of org		1 -	yer identification number
	Contributors (assertation)		3571433
	Contributors (see instructions). Use duplicate copies of Part I if additional spa		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	George Guarini 71 Incline Green Lane	\$368,480	Person X  Payroll X  Noncash X
1	Alamo, CA 94507		(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash
			(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (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.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
BAA		Cabadula B /Carr	900 900 E7 or 900 BE\(2017\)

1 of Part I

Page

1 of

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

1 to

1 of Part II

Name of organization

Guarini Legacy Corporation

Employer identification number

82-3571433

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	18,743 Shares Baycom Corp Stock		
		\$ 362,480.	12/26/17
(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
		  \$ 	<b>- </b>
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<b></b>		  \$	<b>-</b>
(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
		· •	

1 to

of Part III

Name of organization Employer Identification number Guarini Legacy Corporation 82-3571433 Part III | Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once, See instructions.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held N/A (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (d) Description of how gift is held (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

2017	Federal Statements	Page 1
	Guarini Legacy Corporation	82-3571433
Statement 1 Form 990-PF, Part I, Line 16b Accounting Fees		(1)
Accounting Fees	(a) (b) Net (c) Expenses Investment Adjusted Income Net Income  \$ 4,800.  Total \$\frac{\$\frac{4}{3},800.}{\$\frac{1}{3},800.}\$ \$\frac{1}{3}.	(d) Charitable Purposes  0.
Statement 2 Form 990-PF, Part I, Line 18 Taxes		
Annual Filing Fees	(a) (b) Net (c) Expenses Investment Adjusted Income Net Income  \$ 25.  Total \$ 25. \$ 0. \$ 0.	(d) Charitable Purposes  0.
Statement 3 Form 990-PF, Part I, Line 23 Other Expenses		
Rental Expenses	(a)       (b)       Net       (c)         Expenses       Investment       Adjusted         per Books       Income       Net Income         \$ 2,400.       \$ 0.       \$ 0.	(d) Charitable Purposes  \$ 0.
Statement 4 Form 990-PF, Part II, Line 10b Investments - Corporate Stocks		
Corporate Stocks	Valuation Book Method Value	Fair Market Value
17243 Shares Baycom Corp	Cost \$ 333,486. \$ Total \$ 333,486. \$	335,376.

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# **Federal Statements**

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**Guarini Legacy Corporation** 

82-3571433

Total \$

16,000.

Statement 5 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	Amount
Operation Dignity 3850 San Pablo Ave #102 Oakland CA 94607	_	PC	Contribution to General Fund	\$ 1,500.
Birdge of Hope World 13295 Vintner Drive Fishers IN 46037		PC	Contribution to General Fund	1,500.
Nevada Partnership for Homeless Youth 4981 Shirley Street Las Vegas NV 89119		PC	Contribution to General Fund	1,500.
Tides Youth Alliance P.O. Box 170427 San Francisco CA 94117		PC	Contribution to General Fund	1,500.
Marist High School 4200 W. 115th Street Chicago IL 60655		PC	Contribution to General Fund	5,000.
Napa Community Foundation 3299 Claremont Way #2 Napa CA 94558		PC	Contribution to General Fund	1,500.
Pledge to Humanity 433 Front Street Danville CA 94526		PC	Contribution to General Fund	2,500.
Miscellaneous Donation 71 Incline Green Lane Alamo CA 94507		I	Individual Donation	1,000.