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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491192003168

2017

OMB No 1545-0052

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation Do not enter social security numbers on this form as it may be made public.
 Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

Open to Public Inspection

A Persplayer and attribution number 9 B Telephone number (see instructions) [50] of Check, all 127276 G Check, all	For	caler	ndar year 2017, or tax year	beginning 01-01-20)17 , aı	nd end	ding 12-31-	2017			
Number and street (or P.O. Data number of mail is not seleveed to street adversal) Roam's size Section 1111-1020 Control of the province of the provin	Name of foundation				A Employer Id	entification numbe	r				
Ten Authority But 11 Look	OL	ANDER	FAMILY FOUNDATION INC				94-3400451				
One or bess, state or province, country, and ZP or revery possel code ### Address As India, Car Servince ### Check all that apply				t delivered to street address)	Room/suite		B Telephone number (see instructions)				
G Check all best apply In bal return Intoal return of a former public chanty 2 snaps organizations making the 65% 2 snaps organizations making the 65% 15 snaps organizations making the 65% 15 snaps organization of the following the following the 65% 15 snaps organizations making the 65% 15 snaps organization of the following the follo	Citi							(650) 948-8737			
Final return Amended return Amended return Section 501c(13) evempt private foundation Section 4927(9)(1) noneempt charge Section 501c(13) evempt private foundation Section 4927(9)(1) noneempt charge Section 501c(13) evempt private foundation Section 4927(9)(1) noneempt charge Section 501c(13) evempt private foundation Section 4927(9)(1) noneempt charge Section 692(1)(14), 493(1) Section 501c(13) Sect				oreign postal code			C If exemption	application is pendin	g, check here		
Contributions of the foundation Contributions Contributi	G Cł	neck al	ll that apply 🔲 Initial return	\square Initial return of a	former public charity		D 1. Foreign or	ganizations, check he	ere 🛴		
H Check type of organ zation Section 501(x)(3) exempt private foundation			Final return	Amended return							
## Check type of organization ## Che				_			·		· -		
Fair market value of all assets at end of year (from Part II), col (c), line 16) > 7,314,312 Part III (col (c), line 16) > 7,314,312 Part III (col (c), line 16) > 7,314,312 Part III (c) (c), line 16, l	_	•		_							
Analysis of Revenue and Expenses (The total of analysis) Part I, (all previous and common total previous and common total previous and common total previous and common total previous and the son cash bases Part I, (all previous and common total						ıal	F If the founds	ition is in a 60-month	n termination		
1 Contributions, gifts, grants, etc., received (attach schedule) 2 Check 2 Che	of	year <i>(f</i>	from Part II, col (c),	Other (specify)							
of smourbs in columns (b), (c), and (c) may not necessarily coaled the amounts in columns (b), (c), and (c) may not necessarily coaled the amounts in columns (b) (c), and (c) may not necessarily coaled the amounts in columns (c) (c) may not necessarily coaled the amounts in columns (c) (c) may not necessarily coaled to schedule) 2 Check ▶ ☑ If the foundation is not required to attach 5ch a literest on savings and temporary cash investments 4 Dividends and interest from securities 5a. Gross rents 6 Net central income or (loss) 5b. Act gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 282,092 7 Capital gain net income (from Part IV, line 2). 8 Net short-term capital gain 9 Income modifications 10a. Gross sales less returns and allowances be best occurrent of the income of (loss) (attach schedule) 10 Scross sales less returns and allowances be best occurrent of the income of (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 13 Compensation of fineers, directors, trustees, etc 14 Other employees salantes and wages 15 Denson plans, employee benefits 16 Legal fees (attach schedule) 17 Total. Add lines 1 through 11 18 Taxes (attach schedule) 19 Depreciation (attach schedule) 20 Occupancy 19 Depreciation (attach schedule) 21 Titreest 22 Add lines 13 through 23 23 Other expenses (attach schedule) 24 Total page and publications 25 Total expenses and disbursements. Add lines 24 and 25 17 Total compensation of the sale of the	Pa	rt I	Analysis of Revenue and E	Expenses (The total	(a) Bayanya and	T			(d) Disbursements		
1 Contributions gifts, grants, etc , received (attach schedule) 2 Check ► ☑ If the foundation is not required to attach Sch 8 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 Net rental income or (loss) 6 Net gain or (loss) from sale of assets not on line 10 6 Gross sales price for all assets on line 6a 282,093 7 Capital gain net income (from Part IV, line 2) . 8 Net short-term capital gain . 9 Income modifications . 10a Gross sales price for all assets on the 6a 282,093 10 Gross sales less returns and allowances be Less Cost of goods sold . 11 Other income (attach schedule) . 12 Total, Add lines 1 through 11 . 13 Compensation of officers, directors, trustees, etc . 14 Other employee salaries and wages . 15 Pension plans, employee benefits . 16 Legal fees (attach schedule) . 20 Occupring (attach schedule) . 21 Tinterest . 21 Tinterest . 22 Depreciation (attach schedule) . 23 Other expenses (attach schedule) . 24 Tinterest . 25 Gross price (loss) (attach schedule) . 26 Compensation (attach schedule) . 27 Tinterest . 28 Jay 20 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			of amounts in columns (b), (c), and (c	d) may not necessarily	expenses per	(b) N			purposes		
2 Check		1		received (attach					(
Sch B 3 Interest on savings and temporary cash investments 15 15 15 15 15 16 16 16		2		ot required to attach							
1		_	Sch B								
100 Section	erue		-	•		-					
10 10 10 10 10 10 10 10		-		ities	148,292	-	148,292				
10											
8 Net short-term capital gain			, ,	sets not on line 10	9 :1 -14 608	1					
8 Net short-term capital gain					_	1					
8 Net short-term capital gain	SeV.										
10a Gross sales less returns and allowances	ш		•	•							
B Less Cost of goods sold		9	Income modifications								
C Gross profit or (loss) (attach schedule)		10a	Gross sales less returns and allow	rances							
11 Other income (attach schedule) 738		ь	Less Cost of goods sold								
12 Total. Add lines 1 through 11		С	Gross profit or (loss) (attach sche	dule)							
13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages		11	Other income (attach schedule)		738	В	738				
14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) 20 954 20 20 20 20 20 20 20 2		12	Total. Add lines 1 through 11 .		134,437	,	149,045				
15		13	Compensation of officers, director	s, trustees, etc							
16a Legal fees (attach schedule) 954 b Accounting fees (attach schedule) 954 c Other professional fees (attach schedule) 17 Interest 133 18 Taxes (attach schedule) (see instructions) 18 Taxes (attach schedule) and depletion 19 Depreciation (attach schedule) and depletion 10 Occupancy 11 Travel, conferences, and meetings 12 Printing and publications 12 Printing and publications 12 Printing and administrative expenses. 12 Add lines 13 through 23 12 Printing and administrative expenses. 133 24 Total operating and administrative expenses. 24 Add lines 13 through 23 24 Printing and 366,019 36		14	Other employee salaries and wage	es							
23 Other expenses (attach schedule)	es										
23 Other expenses (attach schedule)	ens	16a									
23 Other expenses (attach schedule)	άX	b	- '		3,985						
23 Other expenses (attach schedule)	/e E	C	•	hedule)							
23 Other expenses (attach schedule)	atı										
23 Other expenses (attach schedule)	IStr		, , ,	,	2,047						
23 Other expenses (attach schedule)	III			a aepietion							
23 Other expenses (attach schedule)	Adı		• •								
23 Other expenses (attach schedule)	nd										
26 Total expenses and disbursements. Add lines 24 and 25					9 2 403						
26 Total expenses and disbursements. Add lines 24 and 25	Ē				2,403	-					
26 Total expenses and disbursements. Add lines 24 and 25	era		•	•	9.522		n		n		
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income(if negative, enter -0-)	О	25	-								
27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income(if negative, enter -0-)			Total expenses and disbursem	ents. Add lines 24 and							
a Excess of revenue over expenses and disbursements b Net investment income (If negative, enter -0-) c Adjusted net income(If negative, enter -0-)		27			375,541	-	0		366,019		
disbursements b Net investment income (if negative, enter -0-) c Adjusted net income(if negative, enter -0-)				ses and	-241.104	,					
c Adjusted net income(if negative, enter -0-)		_	disbursements								
			· -	•			149,045				
	E			•			-1 No 44222		000 PE (224=)		

Page 2

237,971

7,314,312

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19

20

21

22

23

24

25

26

28

29 Net 30

31

Part III

2

Fund Balances

ŏ

Assets 27 Deferred revenue .

Unrestricted

Temporarily restricted Permanently restricted .

and complete lines 27 through 31.

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

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize) ▶

Other liabilities (describe ...

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that follow SFAS 117, check here ▶

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

Foundations that do not follow SFAS 117, check here

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

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

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

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

Analysis of Changes in Net Assets or Fund Balances

Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund

	4	Savings and temporary cash investments				
	3	Accounts receivable ▶				
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) ▶				
		Less allowance for doubtful accounts ▶				
2	8	Inventories for sale or use				
sets	9	Prepaid expenses and deferred charges				
As	10a	Investments—U S and state government obligations (attach schedule)				
	ь	Investments—corporate stock (attach schedule)				
	С	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis ▶				
		Less accumulated depreciation (attach schedule) ▶				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)	3,230,91	6 % J	2,831,278	7
	14	Land, buildings, and equipment basis ▶				
		Less accumulated depreciation (attach schedule) ▶				
	1=	Other assets (describe				

Otner assets (describe 🕨 Total assets (to be completed by all filers—see the 16 instructions Also, see page 1, item I) 3,148,723 2,907,619 17 Accounts payable and accrued expenses . 18 Grants payable. Liabilities

3.148.723

3,148,723

3,148,723

2,907,619

2,907,619

2,907,619

2

3

4

5

6

3,148,723

-241,104

2,907,619

2.907.619 Form **990-PF** (2017)

Page **3**

	<u> </u>						
	List and describe 2-story brick ware	(a) the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs	al estate, MLC Co)	(b) How acquir P—Purchas D—Donatio	se	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a				2 20114	-		
		(f)		(g)		(h)
	(e) Gross sales price	Depreciation allowed	Cost or	other basis		Gain o	or (loss)
		(or allowable)	plus exp	ense of sale		(e) plus (f) minus (g)
a							
b							
с							
d							
e							
	Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69			(I)
	(i)	(i)		(k)			h) gain minus
	F M V as of 12/31/69	Adjusted basis as of 12/31/69		of col(ı) (j), ıf any			less than -0-) or om col (h))
a		43 01 12/31/03	0761 661	()), ii aiiy			
b							
					_		
d							
e							
			If gain, also enter in P	art I line 7			
2	Capital gain net income	or (net capital loss)	If (loss), enter -0- in F		$\left. \right. \left. \right\} \left. \right \left. \right. \right. $	2	
3	Net short-term capital o	gain or (loss) as defined in sections :	1222(5) and (6)			_	
_		rt I, line 8, column (c) (see instructi		I-	- 1 l		
	ın Part I, line 8				- } <u>L</u> :	3	
					, –		
Pari	Qualification l	Jnder Section 4940(e) for Re	duced Tax on Net	Investmen	t Inco	me	
(For o	ptional use by domestic p	rivate foundations subject to the sec	tion 4940(a) tax on ne	et investment i	ncome)		
If sect	ion 4940(d)(2) applies, le	aave this part blank					
	. , , ,	•					
		e section 4942 tax on the distributa			eriod?	L Y₁	es 🗹 No
		ot qualify under section 4940(e) Do					
	(a)	nount in each column for each year,	see instructions before	: making any e	entries	(d)	
	se period years Calendar	(b) Adjusted gualifying distributions	(c) Net value of noncharitab	le-use assets		Distribution rat	
year	(or tax year beginning in)	, , ,	sc value of Horienalitab		(-	col (b) divided by c	
	2016	306,195		5,990,292			0 051115
	2015	304,114		5,934,727			0 051243
	2014	203,290		5,642,180			0 036030
	2013	219,000		4,729,328 4,133,055			0 046307 0 043200
	2012 178,550				2		_
	Total of line 1, column (o	d)		-	2		0 227895
		o for the 5-year base period—divide in Indation has been in existence if less		, or by the	3		0 045579
		ncharitable-use assets for 2017 fron			4		6,755,783
5	Multiply line 4 by line 3			[5		307,922
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		[6		1,490
7	Add lines 5 and 6			[7		309,412
		ions from Part XII, line 4 ,			8		366,019
		eater than line 7, check the box in Pa				1% tax rate Se	

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?.

7b

- ،	o1,)
	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees,
ı	and Contractors

	ees, re	oundation managers an	d their compensation	T T	<u> </u>
(a) Name and address	(Title, and average hours per week b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	
RON OLANDER 24191 SUMMERHILL LOS ALTOS, CA 94024	PRES 000	SIDENT 00	0		
STEVEN L HALLGRIMSON		SECRETAR	0	(
TEN ALMADEN BLVD SAN JOSE, CA 95113	000	00			
2 Compensation of five highest-	oaid er	nplovees (other than th	ose included on line 1	 .—see instructions). If no	ne, enter "NONE."
· · · · · · · · · · · · · · · · · · ·		Title, and average		Contributions to	<u> </u>
(a) Name and address of each employee more than \$50,000	paid	hours per week (b) devoted to position	(c) Compensation	employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
NONE					
		1			
		-			
Total number of other employees paid	over \$5	50,000		•	
3 Five highest-paid independent					IE".
(a) Name and address of each per				e of service	(c) Compensation
NONE					
Total number of others receiving over 9	50 000) for professional services			
		<u>'</u>			
Total number of others receiving over \$ Part IX-A Summary of Direct List the foundation's four largest direct charita	Char	itable Activities			Evpances
Part IX-A Summary of Direct List the foundation's four largest direct charita organizations and other beneficiaries served, of	t Char	ritable Activities Including the tax year Including	de relevant statistical inform		Expenses
Part IX-A Summary of Direct List the foundation's four largest direct charita	t Char	ritable Activities Including the tax year Including	de relevant statistical inform		Expenses
Part IX-A Summary of Direct List the foundation's four largest direct charital organizations and other beneficiaries served, of	t Char	ritable Activities Including the tax year Including	de relevant statistical inform		Expenses
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Part IX-A Summary of Direct List the foundation's four largest direct charita organizations and other beneficiaries served, of 1 2 4	t Char	ritable Activities Including the tax year Including	de relevant statistical inform produced, etc		Expenses
Part IX-A Summary of Direct List the foundation's four largest direct charita organizations and other beneficiaries served, of 1 2 4	t Char ble activonference	itable Activities ities during the tax year Includes convened, research papers	de relevant statistical inform produced, etc	nation such as the number of	Expenses
Part IX-A Summary of Direct List the foundation's four largest direct charital organizations and other beneficiaries served, of the served of	t Char ble activonference	itable Activities ities during the tax year Includes convened, research papers	de relevant statistical inform produced, etc	nation such as the number of	
Part IX-A Summary of Direct List the foundation's four largest direct charital organizations and other beneficiaries served, of the served of	t Char ble activonference	itable Activities ities during the tax year Includes convened, research papers	de relevant statistical inform produced, etc	nation such as the number of	
Part IX-A Summary of Direct List the foundation's four largest direct charital organizations and other beneficiaries served, of a served of the served of th	t Char ble activonference	itable Activities ities during the tax year Includes convened, research papers	de relevant statistical inform produced, etc	nation such as the number of	
Part IX-A Summary of Direct List the foundation's four largest direct charital organizations and other beneficiaries served, of 1 2 Part IX-B Summary of Program-related in 1 N/A 2	t Char ble activ onference am-R nvestme	elated Investments into made by the foundation do	de relevant statistical inform produced, etc	nation such as the number of	
Part IX-A Summary of Direct List the foundation's four largest direct charital organizations and other beneficiaries served, of 1 2 Part IX-B Summary of Program-related in 1 N/A 2 All other program-related investment	t Char ble activ onference am-R nvestme	elated Investments into made by the foundation do	de relevant statistical inform produced, etc	nation such as the number of	
List the foundation's four largest direct charita organizations and other beneficiaries served, or 1 2 3 Part IX-B Summary of Program-related in 1 N/A 2	t Char ble activ onference am-R nvestme	elated Investments into made by the foundation do	de relevant statistical inform produced, etc	nation such as the number of	
Part IX-A Summary of Direct List the foundation's four largest direct charital organizations and other beneficiaries served, of 1 2 Part IX-B Summary of Program-related in 1 N/A 2 All other program-related investment	t Char ble activ onference am-R nvestme	elated Investments into made by the foundation do	de relevant statistical inform produced, etc	nation such as the number of	

Amounts set aside for specific charitable projects that satisfy the 3

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

4

5

366.019

1.490

364.529

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3a 3h

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

income Enter 1% of Part I. line 27b (see instructions).

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

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

4

5

71,843

264,456

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294,176

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Part XIII Undistributed Income (see instructions) (a) (b) (c) (d) Years prior to 2016 2016 2017 Corpus Distributable amount for 2017 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2017

294,176 a Enter amount for 2016 only. **b** Total for prior years Excess distributions carryover, if any, to 2017

a From 2012. **b** From 2013. c From 2014. . . . d From 2015. e From 2016. f Total of lines 3a through e. 4 Qualifying distributions for 2017 from Part XII, line 4 🕨 \$

a Applied to 2016, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election

d Applied to 2017 distributable amount. . . . (If an amount appears in column (d), the same amount must be shown in column (a))

indicated below:

e Remaining amount distributed out of corpus **5** Excess distributions carryover applied to 2017 6 Enter the net total of each column as

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must

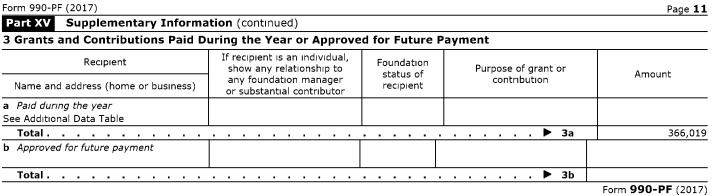
be distributed in 2018 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2018.

10 Analysis of line 9

a Excess from 2013. . . **b** Excess from 2014. . . c Excess from 2015. . . . d Excess from 2016. . . e Excess from 2017. . .

Subtract lines 7 and 8 from line 6a



tor aross a	mounts unless athonyuse indicated	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e)
iter gross a	mounts unless otherwise indicated	(a)	(b)	(c)	(d)	Related or exemp
_	service revenue	Business code	Amount	Exclusion code	Amount	(See instructions
-						
_	nd contracts from government agencies					
	on savings and temporary cash					
	ents			14	15	
	s and interest from securities al income or (loss) from real estate			14	148,292	
	nanced property.					
	pt-financed property					
Net rent	tal income or (loss) from personal property					
	estment income			14	710	2
	(loss) from sales of assets other than					14.60
	ry					-14,60
	ofit or (loss) from sales of inventory					
	venue a					
d						
d e					149.017	-14.58
e Subtotal Total. Ac	Add columns (b), (d), and (e)			1:	149,017 3	
d e Subtotal Total. Ac (See work	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcul	ations)			•	
d e Subtotal Total. Ac (See work	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcul	ations) e Accomplish	nment of Exem	pt Purposes	3	-14,58 134,43
d Subtotal Total. Ac (See workart XVI-ne No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcul Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's exinstructions)	ations) e Accomplish ncome is report empt purposes i	nment of Exem ed in column (e) of other than by prov	pt Purposes f Part XVI-A contribu	3ited importantly to	
d Subtotal Total. Ac (See work art XVI- ne No.	Add columns (b), (d), and (e)	ations) e Accomplish ncome is report empt purposes i	nment of Exem ed in column (e) of other than by prov	pt Purposes f Part XVI-A contribu	3ited importantly to	
d e Subtotal	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calcul Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's exinstructions)	ations) e Accomplish ncome is report empt purposes i	nment of Exem ed in column (e) of other than by prov	pt Purposes f Part XVI-A contribu	3ited importantly to	
d	Add columns (b), (d), and (e)	ations) e Accomplish ncome is report empt purposes i	nment of Exem ed in column (e) of other than by prov	pt Purposes f Part XVI-A contribu	3ited importantly to	
subtotal Total. Ac (See work art XVI-	Add columns (b), (d), and (e)	ations) e Accomplish ncome is report empt purposes i	nment of Exem ed in column (e) of other than by prov	pt Purposes f Part XVI-A contribu	3ited importantly to	
dsubtotal Total. Ac (See work TVI-ne No.	Add columns (b), (d), and (e)	ations) e Accomplish ncome is report empt purposes i	nment of Exem ed in column (e) of other than by prov	pt Purposes f Part XVI-A contribu	3ited importantly to	
dsubtotal Total. Ac (See work TVI-ne No.	Add columns (b), (d), and (e)	ations) e Accomplish ncome is report empt purposes i	nment of Exem ed in column (e) of other than by prov	pt Purposes f Part XVI-A contribu	3ited importantly to	
dsubtotal Total. Ac (See work TVI-ne No.	Add columns (b), (d), and (e)	ations) e Accomplish ncome is report empt purposes i	nment of Exem ed in column (e) of other than by prov	pt Purposes f Part XVI-A contribu	3ited importantly to	
dsubtotal Total. Ac (See work TXVI-ne No.	Add columns (b), (d), and (e)	ations) e Accomplish ncome is report empt purposes i	nment of Exem ed in column (e) of other than by prov	pt Purposes f Part XVI-A contribu	3ited importantly to	
dsubtotal Total. Ac (See work TXVI-ne No.	Add columns (b), (d), and (e)	ations) e Accomplish ncome is report empt purposes i	nment of Exem ed in column (e) of other than by prov	pt Purposes f Part XVI-A contribu	3ited importantly to	
dsubtotal Total. Ac (See work TXVI-ne No.	Add columns (b), (d), and (e)	ations) e Accomplish ncome is report empt purposes i	nment of Exem ed in column (e) of other than by prov	pt Purposes f Part XVI-A contribu	3ited importantly to	
subtotal Total. Ac (See work art XVI-	Add columns (b), (d), and (e)	ations) e Accomplish ncome is report empt purposes i	nment of Exem ed in column (e) of other than by prov	pt Purposes f Part XVI-A contribu	3ited importantly to	
subtotal Total. Ac (See work art XVI-	Add columns (b), (d), and (e)	ations) e Accomplish ncome is report empt purposes i	nment of Exem ed in column (e) of other than by prov	pt Purposes f Part XVI-A contribu	3ited importantly to	
d e Subtotal	Add columns (b), (d), and (e)	ations) e Accomplish ncome is report empt purposes i	nment of Exem ed in column (e) of other than by prov	pt Purposes f Part XVI-A contribu	3ited importantly to	
d	Add columns (b), (d), and (e)	ations) e Accomplish ncome is report empt purposes i	nment of Exem ed in column (e) of other than by prov	pt Purposes f Part XVI-A contribu	3ited importantly to	
d	Add columns (b), (d), and (e)	ations) e Accomplish ncome is report empt purposes i	nment of Exem ed in column (e) of other than by prov	pt Purposes f Part XVI-A contribu	3ited importantly to	
d	Add columns (b), (d), and (e)	ations) e Accomplish ncome is report empt purposes i	nment of Exem ed in column (e) of other than by prov	pt Purposes f Part XVI-A contribu	3ited importantly to	
subtotal Total. Ac (See work art XVI-	Add columns (b), (d), and (e)	ations) e Accomplish ncome is report empt purposes i	nment of Exem ed in column (e) of other than by prov	pt Purposes f Part XVI-A contribu	3ited importantly to	
d e Subtotal	Add columns (b), (d), and (e)	ations) e Accomplish ncome is report empt purposes i	nment of Exem ed in column (e) of other than by prov	pt Purposes f Part XVI-A contribu	3ited importantly to	
d	Add columns (b), (d), and (e)	ations) e Accomplish ncome is report empt purposes i	nment of Exem ed in column (e) of other than by prov	pt Purposes f Part XVI-A contribu	3ited importantly to	
d Subtotal Total. Ac (See work art XVI- ne No.	Add columns (b), (d), and (e)	ations) e Accomplish ncome is report empt purposes i	nment of Exem ed in column (e) of other than by prov	pt Purposes f Part XVI-A contribu	3ited importantly to	

or	m 990-P	F (2017)			Pa	ge 13
l	Part XV	Information Re Exempt Organi	egarding Transfers To and Transactions and Relationships With Noncharit zations	table		
1	Did the (c) of th	organization directly or in e Code (other than sectio	directly engage in any of the following with any other organization described in section 501 in 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
а	Transfe	s from the reporting foun	dation to a noncharitable exempt organization of			
	(1) Ca	sh 		1a(1)		No
				1a(2)		No
b	Other tr	ansactions				
	(1) Sa	es of assets to a nonchar	ıtable exempt organization	1b(1)		No
			noncharitable exempt organization	1b(2)		No
			nt, or other assets	1b(3)		No
	(4) Re	mbursement arrangemen	ts	1b(4)		No
	(5) Lo	ans or loan guarantees.		1b(5)		No
	(6) Per	ormance of services or m	embership or fundraising solicitations	1b(6)		No
c	Sharing	of facilities, equipment, r	nailing lists, other assets, or paid employees	1c		No
	of the g	oods, other assets, or ser	Is "Yes," complete the following schedule Column (b) should always show the fair market with vices given by the reporting foundation. If the foundation received less than fair market valuingement, show in column (d) the value of the goods, other assets, or services received. (c) Name of noncharitable exempt organization.	e	ngemer	ts
<u>,-</u>	, 2	(2) rumount mroned	(2) Description of dampers gamenton	ing arra	-igeinei	

c Sha	ring of facilities, equipment,	mailing lists, othe	r assets, or paid emplo	yees			1c	No
of th	le answer to any of the abov ne goods, other assets, or so ny transaction or sharing an	ervices given by th	e reporting foundation	If the founda	ition received less	than fair market val		
(a) Line	No (b) Amount involved	(c) Name of none	charitable exempt organiza	tion (d) [Description of transfe	ers, transactions, and sh	arıng arrange	ements
2a Is th	ne foundation directly or ind	 	 th, or related to, one o	r more tax-ex	empt organization	ns		
desc	cribed in section 501(c) of the	ne Code (other tha	n section 501(c)(3)) or	ın section 52	7?		☐ Yes	✓ No
b If "Y	es," complete the following (a) Name of organiza		(b) Type of or	ganızatıon	ı	(c) Description of relat	cionship	
					+			
		- 1 1 1 1 1 1 1 1						
	Under penalties of perjury of my knowledge and beli	ef, it is true, corre						
Sian	which preparer has any ki	nowledge	1			Tv.	the IDC disci	

May the IRS discuss this return with the preparer shown Here 2018-06-25 Signature of officer or trustee Date Title (see instr)? Yes No Preparer's Signature PTIN Print/Type preparer's name Date Check if self-P00957628 employed ightharpoonupKIRK KNIGHTCPA 2018-06-25 Paid

Preparer Firm's name ▶ KNIGHT & COMPANY Firm's EIN ▶26-3742864 **Use Only** Firm's address ▶ 425 FIRST STREET SUITE A

Phone no (650) 948-8737 LOS ALTOS, CA 940223674 Form **990-PF** (2017)

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or Amount If recipient is an individual, show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year 2ND CHANCE FOR PETSPO BOX 136 NONE SUPPORT 1,000 EAST BROOKFIELD, MA 01515 ASSISTANCE LEAGUE OF LOS ALTOS NONE SUPPORT 5,000

169 STATE STREET LOS ALTOS, CA 94022			
ASSISTEENS3100 W BURBANK BLVD BURBANK, CA 91505	NONE	SUPPORT	1,000
BAY AREA CHILDRENS THEATER 6114 LA SALLE AVE 431	NONE	SUPPORT	500

OAKLAND, CA 94611

BAY AREA RIDGE TRAIL COUNCIL NONE SUPPORT

5,000 1007 GENERAL KENNEDY AVE SAN FRANCISCO, CA 94129

Total . . . 366,019 3a

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year BEAR LEAGUEPO BOX 393 NONE SUPPORT 1,000 HOMEWOOD, CA 96141 BLACH SCHOOL1120 COVINGTON ROAD NONE SUPPORT 5,000

LOS ALTOS, CA 94024			
CA STATE PARKS FOUNDATION 50 FRANCISCO STREET SAN FRANCISCO, CA 94133	NONE	SUPPORT	2,000
CALRMONT HIGH SCHOOL 500 ALAMEDA DE LAS PULGAS	NONE	SUPPORT	4,000

500 ALAMEDA DE LAS PULGAS BELMONT, CA 94002	NONE	SUPPORT	4,000
CAMINAR SILICON VALLEY 2600 S EL CAMINO REAL	NONE	SUPPORT	2,500

	BELMONT, CA 94002			I
П	CAMINAR SILICON VALLEY 2600 S EL CAMINO REAL	NONE	SUPPORT	

SAN MATEO, CA 94403

Total . . 366,019

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
CANINE COMPANIONS 2965 DUTTON AVE SANTA ROSA, CA 95407	NONE		SUPPORT	1,000
CATHOLIC CHARITIES OF SANTA CLARA 2625 ZANKER ROAD SAN JOSE, CA 95134	NONE		SUPPORT	17,500
CHILDRENS HOSPITAL OF ORANGE CTY 1201 W LA VETA AVE ORANGE, CA 92868	NONE		SUPPORT	1,500
CHILDRENS THERAPY CENTER 29-01 BERKSHIRE ROAD FAIR LAWN, NJ 07410	NONE		SUPPORT	7,500
CLAREMONT MCKENNA COLLEGE BILL ARCE 500 EAST NINTH ST CLAREMONT, CA 91711	NONE		SUPPORT	5,000
Total				366,019

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

1401 PARKMOOR AVE 260 SAN JOSE, CA 95126	NONE	SOFFERN	
COLLINGS FOUNDATION	NONE	SUPPORT	

NONE

COLLEGE OF ADAPTIVE ARTS

3a

37 BARTON ROAD STOW, MA 01775	IVONE	SUFFORT	
CRISTO REY HIGH SCHOOL	NONE	SUPPORT	

-	NONE	SUPPORT	

SUPPORT

6,000

2,500

CRISTO REY HIGH SCHOOL 1390 FIVE WOUNDS LANE SAN JOSE, CA 95116	NONE	SUPPORT	1,000
CSU FOUNDATION401 GOLDEN SHORE LONG BEACH, CA 90802	NONE	SUPPORT	1,870

C, 10002, G, 1 10110			
CSU FOUNDATION401 GOLDEN SHORE LONG BEACH, CA 90802	NONE	SUPPORT	1,870
ECUMENICAL HUNGER PROGRAM	NON	SUPPORT	2,500

LONG BEACH, CA 90802	NONE	SUPPORT	1,870
ECUMENICAL HUNGER PROGRAM 2411 PULGAS AVENUE EAST PALO ALTO, CA 94303	NON	SUPPORT	2,500

2411 PULGAS AVENUE EAST PALO ALTO, CA 94303		_
Total	 	 366,019

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
EL CAMINO HOSPITAL FOUNDATION 2400 GRANT RD MOUNTAIN VIEW, CA 94040	NONE		SUPPORT	2,500
FOCUS ON TANZANIAN COMMUNITIES 14 MOUNT AUBURN ST WATERTOWN, MA 02472	NONE		SUPPORT	500
FRIENDS OF FITZGERALD MARINE RESERV 200 NEVADA AVE MOSS BEACH, CA 94038	NONE		SUPPORT	2,500
FRIENDS OF THE TRUCKEE LIBRARY 10031 LEVON AVE TRUCKEE, CA 96161	NONE		SUPPORT	5,000
GEORGE MARK CHILDREN'S HOUSE 2121 GEORGE MARK LANE SAN LEANDRO, CA 94578	NONE		SUPPORT	1,565

366,019

Total . .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year GIANTS COMMUNITY FUND NONE SUPPORT 525 24 WILLIE MAYS PLAZA SAN FRANCISCO, CA 94107

GIVE ONE DOLLAR A DAY 125 STEINER STREET SAN FRANCISCO, CA 94117	NONE	SUPPORT	1,000
GLIDE330 ELLIS ST SAN FRANCISCO, CA 94102	NONE	SUPPORT	2,000
GOLDEN GATE NATIONAL PARKS CONSERVA FORT MASON 201 SAN FRANCISCO, CA 94123	NONE	SUPPORT	1,000
HAPPY HOLLOW FOUNDATION 1300 SENTER ROAD	NONE	SUPPORT	1,000

SAN JOSE, CA 95112

Total . 366,019

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year HIDDEN VILLA26870 MOODY RD NONE SUPPORT 1,549

LOS ALTOS HILLS, CA 94022			
HUMANE SOCIETY OF SILICON VALLEY 901 AMES AVE MILPITAS, CA 95035	NONE	SUPPORT	2,500
HUMANE SOCIETY OF TRUCKEE	NONE	SUPPORT	23,010

HUMANE SOCIETY OF TRUCKEE 10382 DONNER PASS RD 3 TRUCKEE, CA 96161	NONE	SUPPORT	23,010
JASPER RIDGE FARMPO BOX 620924 WOODSIDE, CA 94062	NONE	SUPPORT	5,000

'			
JASPER RIDGE FARMPO BOX 620924 WOODSIDE, CA 94062	NONE	SUPPORT	5,000
JEWISH HOME302 SILVER AVE SAN FRANCISCO, CA 94112	NONE	SUPPORT	2,500

JEWISH HOME302 SILVER AVE SAN FRANCISCO, CA 94112	NONE	SUPPORT	2,500
Total		 	366,019

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

CURRORT

1,000

7,500

200

366,019

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

11260 DONNER PASS RD 256 TRUCKEE, CA 96161	NONE	SUPPORT	
KIDS ZONE MUSEUM	NONE	SUPPORT	

KIDS ZONE MUSEUM 11711 DONNER PASS RD IRUCKEE, CA 96161	NONE	SUPPORT	
KIVA875 HOWARD ST 340 SAN FRANCISCO, CA 94103	NONE	SUPPORT	

KIVA875 HOWARD ST 340 SAN FRANCISCO, CA 94103	NONE	SUPPORT	
LEAGUE TO SAVE LAKE TAHOE 2608 LAKE TAHOE BLVD	NONE	SUPPORT	

LEAGUE TO SAVE LAKE TAHOE 2608 LAKE TAHOE BLVD SOUTH LAKE TAHOE, CA 96150	NONE	SUPPORT	4,000
LOAVES AND FISHES	NONE	SUPPORT	15 000

2608 LAKE TAHOE BLVD SOUTH LAKE TAHOE, CA 96150			·
LOAVES AND FISHES 358 NORTH MONTGOMERY ST	NONE	SUPPORT	15,000

SOUTH LAKE TAHOE, CA 96150			
LOAVES AND FISHES 358 NORTH MONTGOMERY ST SAN 10SE CA 95134	NONE	SUPPORT	15

LOAVES AND FISHES 358 NORTH MONTGOMERY ST SAN JOSE, CA 95134	NONE	SUPPORT	

Total . 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year LOS ALTOS COMMUNITY FOUNDATION NONE SUPPORT 5,000 183 HILLVIEW AVE LOS ALTOS, CA 94022 LOS ALTOS EDUCATIONAL FOUNDATION | NONE SUPPORT 1.000

201 CONVINGTON ROAD LOS ALTOS, CA 94024			_,,
LOS ALTOS HIGH SCHOOL ATHLETICS 1299 BRYANT AVE MOUNTAIN VIEW, CA 94040	NONE	SUPPORT	4,000
LOS ALTOS HISTORY MUSEUM 51 S SAN ANTONIO RD	NONE	SUPPORT	500

500

LOS ALTOS, CA 94022			
MARINE MAMMAL CENTER	NONE	SUPPORT	

2000 BUNKER ROAD

SAUSALITO, CA 94965

Total . 366,019

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year MIDORI KAI5674 SONOMA DR NONE SUPPORT 5,000 PLEASANTON, CA 94566

MIRACLE DISTRIBUTION CENTER NONE SUPPORT 300 3947 E LA PALMA AVE

ANAHEIM, CA 92807			
MOUNTAIN VIEW HS ATHLETIC DPT 2900 PARKWAY DR EL MONTE, CA 91732	NONE	SUPPORT	4,000
MUTTATU ESEE ALABAMA ST	NONE	CLIDDODT	2 500

2900 PARKWAY DR EL MONTE, CA 91732			
MUTTVILLE255 ALABAMA ST SAN FRANCISCO, CA 94103	NONE	SUPPORT	2,500

MUTTO GULESEE ALABAMA CT	NONE	CURRORT	3.500
MUTTVILLE255 ALABAMA ST SAN FRANCISCO, CA 94103	NONE	SUPPORT	2,500
MVLA COMMUNITY SCHOLARS	NONE	SUPPORT	6,000

SAN FRANCISCO, CA 94103			
MVLA COMMUNITY SCHOLARS 183 HILLVIEW AVE LOS ALTOS, CA 94022	NONE	SUPPORT	6,000

Total			366,019	
183 HILLVIEW AVE LOS ALTOS, CA 94022	HONE	SOLION	0,00	
MVLA COMMUNITY SCHOLARS I	INONE	I ISUPPORT I	1 6,00	

Form 990PF Part XV Line 3 - Gran	ts and Contributions Paid	During the	Year or Approved for Future	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
NAPA HUMANE SOCIETY 3265 CALIFORNIA BLVD NAPA, CA 94558	NONE		SUPPORT	2,500
NAPA VALLEY COMM DISASTER RELIEF FD 3299 CLAREMONT WAY STE 2 NAPA, CA 94558	NONE		SUPPORT	2,500
NATIONAL CTR FOR EQUINE FAC THERAPY 880 RUNNYMEDE ROAD WOODSIDE, CA 94062	NONE		SUPPORT	5,000
NATIONAL PARKS CONSERVANCY ASSOC 1300 19TH ST NEW STE 300 WASHINGTON, DC 20036	NONE		SUPPORT	1,000
NEVADA COUNTY SEARCH&RESCUE 950 MAIDU AVE	NONE		SUPPORT	500

THERAPY 880 RUNNYMEDE ROAD WOODSIDE, CA 94062	NONE	561161	3,00
NATIONAL PARKS CONSERVANCY ASSOC	NONE	SUPPORT	1,000

3a

NEVADA CITY, CA 95959

366,019 Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Purpose of grant or Amount Recipient show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NOTRE DAME HIGHSCHOOL NONE SUPPORT 2,500 586 S 2ND ST SAN JOSE, CA 95112 NONE NRDC40 WEST 20TH ST **SUPPORT** 1,000 NEW YORK, NY 10011 OKIZU16 DIGITAL DRIVE NONE SUPPORT 3,000 NOVATO, CA 94949 PALO ALTO MUSEUM AND ZOO NONE SUPPORT 2.500 1451 MIDDLEFIELD RD PALO ALTO, CA 94301

SUPPORT

5.000

366,019

PATHWAYS HOME HEALTH & HOSPICE

585 N MARY AVE SUNNYVALE, CA 94085

3a

NONE

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year PENINSULA HUMANE SOCIETY NONE SUPPORT 2,500 12 AIRPORT BLVD SAN MATEO, CA 94401

PENINSULA OPEN SPACE TRUST 222 HIGH STREET PALO ALTO, CA 94301	NONE	SUPPORT	3,000
PROJECT MANA948 INCLINE WAY INCLINE VILLAGE, NV 89451	NONE	SUPPORT	5,000
PROJECT NIGHT NIGHT148 BEULAH ST SAN FRANCISCO, CA 94117	NONE	SUPPORT	3,000

SUPPORT

2,500

366,019

NONE

REACH FOUNDATION

3a

1027 FARMINGTON AVE FARMINGTON, CT 06032 Total . . .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year RONALD MCDONALD HOUSE NONE SUPPORT 2,500 4560 FOUNTAIN AVE LOS ANGELES, CA 90029 SAINT FRANCIS HIGH SCHOOL NONE SUPPORT 5,000

1885 MIRAMONTE AVENUE MOUNTAIN VIEW, CA 94040			
SAMARITAN HOUSE4031 PACIFIC BLVD SAN MATEO, CA 94403	NONE	SUPPORT	3,000
SAN FRANCISCO ZOO1 ZOO RD SAN FRANCISCO, CA 94132	NONE	SUPPORT	5,000

SAN FRANCISCO, CA 94132			,
SAN JOSE SPORTS AUTHORITY 345 PARK AVE MS E-500 SAN JOSE, CA 95110	NONE	SUPPORT	13,000

Total. 366,019 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
SAN JOSE STATE LIBRARY 150 E SAN FERNANDO ST SAN JOSE, CA 95112	NONE		SUPPORT	4,000
SAN MATEO COUNTY PARKS FOUNDATION 1701 COYOTE POINT DR SAN MATEO, CA 94401	NONE		SUPPORT	3,000
SANDY HOOK PROMISE ACTION FUND 13 CHURCH HILL RD NEWTOWN, CT 06470	NONE		SUPPORT	1,000
SANTA CLARA LAW LIBRARY 50 EL CAMINO REAL SANTA CLARA, CA 95053	NONE		SUPPORT	5,000
SANTA CLARA UNIVERSITY 500 EL CAMINO REAL SANTA CLARA, CA 95053	NONE		SUPPORT	7,500

3a

366,019

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SEMPERVIRENS FUND NONE SUPPORT 1,000 419 S SAN ANTONIO ROAD LOS ALTOS, CA 94022 CIEDRA WATCHAGO CRRING CT NONE 2 500 CLIDDADT

CHANNA (ALE COMMUNITAL CERVITOES	NONE	CURRORE	1 000
STROKE AWARENESS FOUNDATION 2105 S BSCOM AVE CAMPBELL, CA 95008	NONE	SUPPORT	5,000
SPECIAL OLYMPICS1133 19TH ST NW WASHINGTON, DC 20036	NONE	SUPPORT	1,000
NEVADA CITY, CA 95959	NONE	SUPPORT	3,500

,000

MPBELL, CA 95008			
NNYVALE COMMUNITY SERVICES 5 KIFER RD NNYVALE, CA 94086	NONE	SUPPORT	1,0

Total . 366,019

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year TAHOE FOREST HEALTH SYSTEM NONE SUPPORT 12,000 **FOUNDATI** 10121 PINE AVE TRUCKEE, CA 96161

TAHOE FUNDPO BOX 7124 TAHOE CITY, CA 96145	NONE	SUPPORT	2,500
TAHOE RIM TRAIL ASSOCIATION 948 INCLINE WAY INCLINE VILLAGE, NV 89451	NONE	SUPPORT	2,500
TAHOE TRUCKEE COMMUNITY FOUNDATION PO BOX 366 TRUCKEE CA 96160	NONE	SUPPORT	3,000

INCLINE VILLAGE, NV 89451			
TAHOE TRUCKEE COMMUNITY FOUNDATION PO BOX 366 TRUCKEE, CA 96160	NONE	SUPPORT	3,000
TAHOE TRUCKEE EXCELLENCE IN EDUCATI 11071 DONNER PASS ROAD TRUCKEE, CA 96161	NONE	SUPPORT	5,000

FOUNDATION PO BOX 366 TRUCKEE, CA 96160			3,000
TAHOE TRUCKEE EXCELLENCE IN EDUCATI 11071 DONNER PASS ROAD TRUCKEE, CA 96161	NONE	SUPPORT	5,000

PO BOX 366 TRUCKEE, CA 96160			
TAHOE TRUCKEE EXCELLENCE IN EDUCATI 11071 DONNER PASS ROAD TRUCKEE, CA 96161	NONE	SUPPORT	5,00

3a

366,019 Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year THE BASIC FUND1301 CLAY ST 70450 NONE SUPPORT 10,000

OAKLAND, CA 94612			
THE KILGORIS PROJECT 668 MEADOW LANE LOS ALTOS, CA 94022	NONE	SUPPORT	

3,000

5,000

1,000

3,000

THE SPARTAN FOUNDATION 1393 SOUTH 7TH STREET SAN JOSE, CA 95112	NONE	SUPPORT	
TOYS FOR TOTS	NONE	SUPPORT	

SAN JUSE, CA 95112			
TOYS FOR TOTS 18251 QUANTICO GATEWAY DR TRIANGLE, VA 22172	NONE	SUPPORT	

TRUCKEE COMMUNITY CHRISTMAS	NONE	SUPPORT	
18251 QUANTICO GATEWAY DR TRIANGLE, VA 22172	NONE	SOFFORT	
TOYS FOR TOTS	INONE	I SUPPORT	

TRIANGLE, VA 22172			
TRUCKEE COMMUNITY CHRISTMAS	NONE	SUPPORT	

TRIANGLE, VA 22172			
TRUCKEE COMMUNITY CHRISTMAS PO BOX 2955	NONE	SUPPORT	

TRIANGEE, VA 22172			
TRUCKEE COMMUNITY CHRISTMAS	NONE	SUPPORT	
PO BOX 2955			
TRUCKEE, CA 96160			

Total	 	 366 019
PO BOX 2955 TRUCKEE, CA 96160		

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year TRUCKEE DONNER HISTORICAL NONE SUPPORT 1,000 SOCIETY PO BOX 8816 TRUCKEE, CA 96162 NONE TRUCKEE DONNER LAND TRUST SUPPORT 7,500

10069 W RIVER ST C1 TRUCKEE, CA 96162			
TRUCKEE TRAILSPO BOX 1751 TRUCKEE, CA 96160	NONE	SUPPORT	3,000
TURNING WHEELS THERAPY 225 WEST ROOSEVELT ROAD	NONE	SUPPORT	5,000

TURNING WHEELS THERAPY 225 WEST ROOSEVELT ROAD WHEATON, IL 60187 NONE SUPPORT	TRUCKEE, CA 96160	NOIVE	SUPPORT	3,
	225 WEST ROOSEVELT ROAD	NONE	SUPPORT	5,

	TURNING WHEELS THERAPY 225 WEST ROOSEVELT ROAD WHEATON, IL 60187	NONE	SUPPORT	
l	U OF SANTA CLARA ATHLETICS	NONE	SUPPORT	

225 WEST ROOSEVELT ROAD WHEATON, IL 60187	NONE	SUPPORT	5,01
U OF SANTA CLARA ATHLETICS	NONE	SUPPORT	7,50

WHEATON, IL 60187			
U OF SANTA CLARA ATHLETICS 500 EL CAMINO REAL SANTA CLARA CA 95053	NONE	SUPPORT	7,500

366,019

U OF SANTA CLARA ATHLETICS 500 EL CAMINO REAL SANTA CLARA, CA 95053	NONE	SUPPORT	
SANTA CLARA, CA 93033			l

Total .

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

UNIVERSITY OF SAN FRANCISCO UCSF BOX 0248 SAN FRANCISCO, CA 94143	NONE	SUPPORT	10,000
VASCULAR CURES	NONE	SUPPORT	1.000

Total		 	366.019
VASCULAR CURES 274 REDWOOD SHORES PWY 7 REDWOOD CITY, CA 94065	NONE	SUPPORT	1,000
SAN FRANCISCO, CA 94143			

VASCULAR CURES 274 REDWOOD SHORES PWY 7 REDWOOD CITY, CA 94065	NONE	SUPPORT	1,000
Total		 	366.019

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TY 2017 Accounting Fee	s Schedule			_
1	Name: OLANDE	R FAMILY FOUNDAT	ION INC	
	EIN: 94-3400	451		
Accounting Fees Schedule				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	3,985			

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Gain/Loss from Sale of Other Assets Schedule

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Name: OLANDER FAMILY FOUNDATION INC

EIN: 94-3400451

			1 1		1	1 1			1	
Name	Date Acquired	How A cquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Met hod	Sales Expenses	Total (net)	Accumulated Depreciation
800 SHS AMTRUST FINANCIAL SRV INC	2014-10	PURCHASE	2017-05		10,194	19,420			-9,226	
500 SHS INFINERA CORP	2015-03	PURCHASE	2017-01		4,167	9,804			-5,637	
200 SHS NORFOLK SOUTHERN CORP	2014-03	PURCHASE	2017-11		25,123	19,613			5,510	
500 SHS STEEL DYNAMICS	2014-07	PURCHASE	2017-12		19,405	11,018			8,387	
500 SHS STEEL DYNAMICS	2015-08	PURCHASE	2017-12		19,405	10,814			8,591	
800 SHS EMERSON ELECTRIC CO	2002-08	PURCHASE	2017-01		43,987	18,716			25,271	
486 SHS EXPRESS SCRIPTS HLDS CO	2003-11	PURCHASE	2017-04		29,449	10,924			18,525	
2800 SHS GENERAL ELECTRIC CO	2002-08	PURCHASE	2017-11		50,313	86,660			-36,347	
2800 SHS GENERAL ELECTRIC CO	2002-08	PURCHASE	2017-12		48,562	86,660			-38,098	
300 SHS UNITED PARCEL SER	2007-08	PURCHASE	2017-02		31,488	23,072			8,416	

DLN: 93491192003168

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TY 2017 Investments - Other S	Schedule		_
Name:	OLANDER FAMILY	FOUNDATION INC	

Category/ Item		Listed at Cost or	Book Value	End of Y
Investments Other Schedule 2				
EIN:	94-3400451			

Investments Other Schedule 2		
Category/ Item	Listed at Cost or FMV	Вс

DI N: 93491192003168

Year Fair

Market Value

2,831,278 7,237,971

AT COST

MORGAN STANLEY STOCKS

CEDAR FAIR

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TY 2017 Legal Fees Schedule						
Name: OLANDER FAMILY FOUNDATION INC						
EIN: 94-3400451						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
LEGAL EXPENSE	954					

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLI	N: 93491192003168	
TY 2017 Other Expenses Schedule					
Name:	OLANDER FAMILY FOUNDATION INC				
EIN:	94-3400451				
Other Expenses Schedule	,				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
EXPENSES					
NONDEDUCTIBLE EXPENSES	2,126				
OFFICE SUPPLIES	217				
LICENSE & FEES	60				

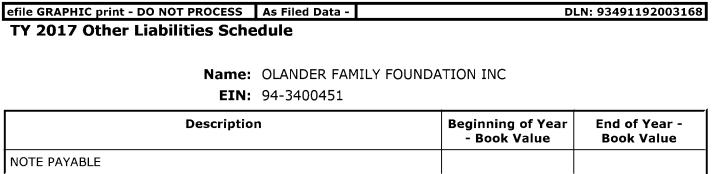
DLN: 93491192003168

Name: OLANDER FAMILY FOUNDATION INC

EIN:	94-3400451

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Other Income Schedule Description Revenue And Expenses Per Books Net Investment Income Adjusted Net Income INVESTMENT INCOME - CEDAR FAI 710 710 OTHER INCOME 28 28



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TY 2017 Taxes Schedule						
Name: OLANDER FAMILY FOUNDATION INC EIN: 94-3400451						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
FEDERAL TAXES	2,01	1				
STATE TAXES	3	6				