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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491256002169

OMB No 1545-0052

2017

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

For	cale	ndar year 2017, or tax year beginning 11-01-20	017 , ar	nd ending 10-31	-2018		
		undation PACKARD ENTERPRISE FOUNDATION		A Employer id	A Employer identification number		
		RGANIZATION		47-5011215			
Num	ber and	d street (or P O box number if mail is not delivered to street address TREET NW) Room/suite	B Telephone nu	ımber (see ınstructio	ns)	
,	33 0 31			(202) 772-446	8		
		n, state or province, country, and ZIP or foreign postal code ON, DC 20001	_	C If exemption	application is pendin	g, check here	
						" ▶ ⊔	
G Ch	neck al		former public charity	D 1. Foreign or	ganızatıons, check he	ere 🕨 🔲	
		☐ Final return ☐ Amended return			rganizations meeting ck here and attach co		
		☐ Address change ☐ Name change		E If private fo	undation status was t	terminated	
_		ype of organization		under section	on 507(b)(1)(A), chec	k here	
		n 4947(a)(1) nonexempt charitable trust Uother taxable ket value of all assets at end Jaccounting method	le private foundation Cash Accru	T If the found	ation is in a 60-monti	h tormination —	
of '	year <i>(f</i>	from Part II, col (c), ◆\$ 69,474,642 Other (specify) (Part I, column (d) must			on 507(b)(1)(B), chec		
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and			(d) Disbursements	
		of amounts in columns (b), (c), and (d) may not necessarily	expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes	
	1	equal the amounts in column (a) (see instructions))	ļ			(cash basis only)	
	1	Contributions, gifts, grants, etc , received (attach schedule)	10,000,000				
	2	Check ► ☐ If the foundation is not required to attach					
		Sch B					
	3	Interest on savings and temporary cash investments	1 245 720	2 044 405			
	4	Dividends and interest from securities	1,346,728	2,041,193			
	5a b	Net rental income or (loss)					
e	6a	Net gain or (loss) from sale of assets not on line 10	775,335				
Ę	b	Gross sales price for all assets on line 6a	· ·				
Revenue	-	39,391,617	7				
~	7	Capital gain net income (from Part IV, line 2)		1,214,560)		
	8	Net short-term capital gain					
	9 10a	Gross sales less returns and allowances					
	ь	Less Cost of goods sold	<u></u>				
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)		1,136	5		
	12	Total. Add lines 1 through 11	12,122,063	3,256,889)		
	13	Compensation of officers, directors, trustees, etc	0				
	14	Other employee salaries and wages					
es	15	Pension plans, employee benefits					
sue	16a	Legal fees (attach schedule)	1,320	C	0	1,320	
Expenses	ь	Accounting fees (attach schedule)	63,836	31,918	0	20,641	
îe E	С	Other professional fees (attach schedule)	83,871	83,871			
and Administrative	17	Interest					
IStr	18	Taxes (attach schedule) (see instructions)	52,000	1,552			
Ē	19	Depreciation (attach schedule) and depletion					
Adı	20	Occupancy					
pu	21 22	Travel, conferences, and meetings					
g a	23	Other expenses (attach schedule)	205,887	57,375	5	176,324	
Operating	24	Total operating and administrative expenses.		1,575			
ær	- '	Add lines 13 through 23	406,914	174,716	, ,	198,285	
Ö	25	Contributions, gifts, grants paid	2,956,167			2,956,167	
	26	Total expenses and disbursements. Add lines 24 and 25	2 262 004	174 740		2 454 452	
	27	Subtract line 26 from line 12	3,363,081	174,716	<u> </u>	3,154,452	
	a	Excess of revenue over expenses and	8,758,982				
	 	disbursements Net investment income (If negative, enter -0-)		3,082,173			
	b c	Adjusted net income (if negative, enter -0-)		3,002,173	1		
For		work Reduction Act Notice, see instructions.	<u> </u>	Cat No 11289	I X For	m 990-PF (2017)	

43,242,156

21,094,990

43,106

69,474,642

,990

43,106

69,474,642

52,116

52,116

69,422,526

69,422,526

69,474,642

1

62,172,174

8,758,982

21,218

62,475,653

303,479

303,479

62,172,174

62,172,174

62,475,653

*

	2	Savings and temporary cash investments	25,743,989		5,094,390
	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 ▶			
ιΛ	8	Inventories for sale or use			
sets	9	Prepaid expenses and deferred charges			
Ass	10a	Investments—U S and state government obligations (attach schedule)			
-	Ь	Investments—corporate stock (attach schedule)	0	9	43,242,156
	l c	Investments—corporate bonds (attach schedule)		<u> </u>	21,094,990
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	36,710,446	₩ ,	C
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	I			l	

15

16

17

18

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20 21

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25

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27

28

29 30

31

Part III

2

3 4 5

Liabilities

Net Assets or Fund Balances

Other assets (describe > _

Other liabilities (describe ▶_

Unrestricted

Temporarily restricted

Permanently restricted

and complete lines 27 through 31.

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

Enter amount from Part I, line 27a

instructions Also, see page 1, item I)

Accounts payable and accrued expenses .

Total assets (to be completed by all filers—see the

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

Capital stock, trust principal, or current 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-

Analysis of Changes in Net Assets or Fund Balances

Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds

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

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Other increases not included in line 2 (itemize)	_	245,766
Add lines 1, 2, and 3	4	71,176,922
Decreases not included in line 2 (itemize) ▶	5	1,754,396
Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	69,422,526
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Page **3**

<u> </u>						
	(a) the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs		(b) How acquired P—Purchase D—Donation		(c) acquired , day, yr)	(d) Date sold (mo , day, yr)
1aSee Additional Data Table	9					
b						
<u>-</u>						
d						
e				1		
	(f)		(g)		(h)
(e) Gross sales price	Depreciation allowed (or allowable)	Cost or	other basis ense of sale		Gain o	r (loss)) minus (g)
a See Additional Data Table	e				. , , , , ,	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
b						
С						
d						
e						
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69		- /	I)
	(j)	i	(k)		Gains (Col (h) gain minus
(i) F M V as of 12/31/69	Adjusted basis as of 12/31/69	Excess	of col (ı) (յ), ıf any	col		less than -0-) or om col (h))
a See Additional Data Table			3777		,	
b						
c						
d				1		
e				1		
-		If gain, also enter in P	art I. line 7	1		
2 Capital gain net income	or (net capital loss)	If (loss), enter -0- in F		2		1,214,560
3 Net short-term capital o	gain or (loss) as defined in sections :	1222(5) and (6)				<u> </u>
	rt I, line 8, column (c) (see instructi)- 1			
in Part I, line 8			}	3		
			ļ			
Part V Qualification L	Jnder Section 4940(e) for Re	educed Tax on Net	Investment In	come		
(For optional use by domestic p	rivate foundations subject to the sec	ction 4940(a) tax on ne	t investment incor	ne)		
If section 4940(d)(2) applies, le	eave this part blank					
Was the foundation liable for the	e section 4942 tax on the distributa	ble amount of any year	in the base period	12	□ Y	es 🔽 No
	et qualify under section 4940(e) Do		in the base period			
	nount in each column for each year,		making any entri	es		
(a)	(b)	(c)			(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitab	le-use assets		istribution rati b) divided by c	
2016	5,077,105		61,830,376	(1)	o, aivided by C	0 082113
2015	3,851,350		23,669,548			0 162713
2013	3,031,330		23,003,340			0 1027 13
2013						
2012						
2 Total of line 1, column (c	i)		2			0 244826
, ,	for the 5-year base period—divide					0 2 1 1020
	idation has been in existence if less		<u>3</u>			0 122413
	ncharitable-use assets for 2017 fron		4			62,631,887
5 Multiply line 4 by line 3			5			7,666,957
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		6			30,822
7 Add lines 5 and 6			7			7,697,779
8 Enter qualifying distributi	ons from Part XII, line 4 ,		8			3,154,452
	rater than line 7, check the box in Pa			ng a 1%	tax rate Se	

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

7b

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Part VIII Information About Of and Contractors	ficers, Directors, Trust	ees, Foundation Ma	inagers, Highly Paid En	nployees,
1 List all officers, directors, trustees	, foundation managers ar	nd their compensation	(see instructions).	
(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	Expense account, (e) other allowances
See Additional Data Table			compensation	
2 Compensation of five highest-paid	employees (other than t	nose included on line 1	.—see instructions). If no	ne, enter "NONE."
(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
Total number of other employees paid over				E"
3 Five highest-paid independent con (a) Name and address of each person			e of service	(c) Compensation
BENEVITY	para more than \$50,000	0	e or service	205,443
32 W 25TH AVENUE SAN MATEO, CA 94403				
GOLDMAN SACHS		0		83,871
1735 MARKET STREET PHILADELPHIA, PA 19103				
		-		
		_		
Total number of others receiving over \$50,0 Part IX-A Summary of Direct Ch				
List the foundation's four largest direct charitable a organizations and other beneficiaries served, confe			nation such as the number of	Expenses
1				
2				
3				
4				
Describe the two largest program-related invest	-Related Investments	·	and 2	Amount
1	ments made by the foundation d	aring the tax year on lines I	und 2	Amount
2				
All other program-related investments S	ee instructions			
3				
Total. Add lines 1 through 3				

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

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

Amounts set aside for specific charitable projects that satisfy the

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

2

3

4

5

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

2

3a 3h

4

5

3,154,452

3,154,452

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3,069,951

3,069,951

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Part XIII	٠.	•	• •	_	_	_	•	•	١.	_	_	_	•
Part XIII		•	I	1		1	ī		ī		Г		
	ı	1	c	1	×	4	٧.						

b Total for prior years

a From 2012. **b** From 2013. c From 2014. . . . d From 2015.

e From 2016.

Undistributed Income (see instructions)

a Enter amount for 2016 only.

Excess distributions carryover, if any, to 2017

f Total of lines 3a through e.

d Applied to 2017 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the

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

6 Enter the net total of each column as

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

indicated below:

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

1 Distributable amount for 2017 from Part XI, line 7

2015 , 2014 , 2013

2 Undistributed income, if any, as of the end of 2017

2.667.873 2,003,722

2,667,873 2,003,722

84.501

(a) Corpus

4.671.595

84.501

4,756,096

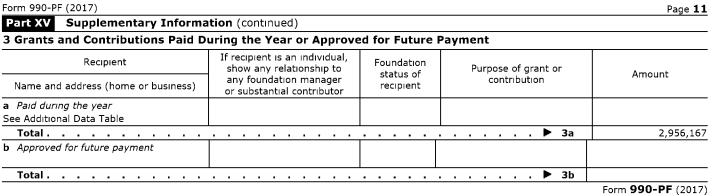
4,756,096

(b) Years prior to 2016

(c)

2016

orr	m 990-PF (2017)					Page 10
ŀ	Private Operating Found	ations (see ınstr	uctions and Part \	VII-A, question 9)		
	If the foundation has received a ruling or de foundation, and the ruling is effective for 20	17, enter the date	of the ruling	▶∟_		
b	Check box to indicate whether the organization	on is a private oper	rating foundation des	scribed in section	☐ 4942(ر)(3) or ☐	(5)(5) 4942
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(6) 10141
b	85% of line 2a					_
	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income Supplementary Information	(Complete this	nart only if the	organization ha	d &E 000 or more	
Pa	assets at any time during th			organization na	u \$5,000 or more	5 111
1 a	Information Regarding Foundation Man. List any managers of the foundation who have before the close of any tax year (but only if	e contributed more				ר
	NA	,		, ,	. , , , ,	
Ь	List any managers of the foundation who ow ownership of a partnership or other entity)				arge portion of the	
	NA					
•						<u> </u>
2	Information Regarding Contribution, Gr			_		
	Check here ► ☑ If the foundation only mak unsolicited requests for funds If the founda other conditions, complete items 2a, b, c, a	tion makes gifts, gr				der
а	The name, address, and telephone number of	or email address of	the person to whom	applications should	be addressed	
b	The form in which applications should be sul	omitted and informa	ation and materials t	they should include		
c	Any submission deadlines					
d	Any restrictions or limitations on awards, su factors	ch as by geographic	cal areas, charitable	fields, kinds of instit	cutions, or other	



Enter gross	amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
1 Program	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions
				+		
	and contracts from government agencies					
2 Membe 3 Intere	ership dues and assessments est on savings and temporary cash					
	ments			14	1,346,728	
	ds and interest from securities tal income or (loss) from real estate					
	financed property					
	ebt-financed property					
6 Net re	ntal income or (loss) from personal property					
7 Other II	nvestment income					
	or (loss) from sales of assets other than					
	ory			18	775,335	
	profit or (loss) from sales of inventory					
	evenue a					
				1		
e					2 122 252	
e				12	2,122,063	
e 12 Subtota 13 Total.		ations)		13	2,122,063	
e 12 Subtota 13 Total. (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul Belationship of Activities to th	ations) e Accomplisi	nment of Exem	pt Purposes	3	2,122,063
e 12 Subtota 13 Total. (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul	ations) e Accomplisi income is report	nment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	2,122,063
e	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul Belationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ations) e Accomplisi income is report	nment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	2,122,063
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e	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul Belationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ations) e Accomplisi income is report	nment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	2,122,063
e	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul Belationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ations) e Accomplisi income is report	nment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	2,122,063
e	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul Belationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ations) e Accomplisi income is report	nment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	2,122,063
e	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul Belationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ations) e Accomplisi income is report	nment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	2,122,063

orm 990-PF	<u> </u>							Pa	ge 13	
Part XVII	Exempt Organiz	zations				lationships With No				
	ganization directly or inc Code (other than section					nization described in sect litical organizations?	ion 501	Yes	No	
a Transfers	from the reporting found	dation to a none	charitable exe	mpt organization	of					
(1) Cash							. 1a(1)		No	
(2) Othe	rassets						1a(2)		No	
b Other tran										
` '	s of assets to a noncharit	•	-				1b(1)	1	No	
	hases of assets from a ne						1b(2)	_	No	
	al of facilities, equipmen	•					1b(3)	_	No	
	bursement arrangement s or loan guarantees.						. 1b(4)	_	No No	
	rmance of services or me						. 1b(5)	_	No	
• •		•	-				. 1c		No	
d If the ans	wer to any of the above ods, other assets, or serv	ıs "Yes," compl vices given by t	ete the follow he reporting fo	ing schedule Coli oundation If the	umn (b) sho foundation re	uld always show the fair eceived less than fair ma r assets, or services rece	rket value	•		
(a) Line No	(b) Amount involved	(c) Name of nor	ncharitable exem	npt organization	(d) Descrip	tion of transfers, transactions	s, and sharing arra	ingemen	its	
described	ndation directly or indire in section 501(c) of the complete the following so (a) Name of organization	Code (other the	an section 501		ion 527? .		□Yes	✓	No	
	.,		, ,	, ,,		, , , ,				
of n whi		it is true, corre				npanying schedules and s other than taxpayer) is b	pased on all info	rmation	n of	
Sign Here	*****			2019-09-15	***	***	May the IRS or return with the prepa			
	Signature of officer or tr	ustee		Date	Title	•	below (see instr)?	Yes	□ _{No}	
	Print/Type preparer's	name Pr	eparer's Signa	ature	Date	Check if self-	PTIN			
Paid	EDWARD J REITME	YER				employed ▶	P0132	1175		
Preparer Use Only		CUM LLP					Fırm's EIN ▶			
/		01 MARKET STF	REET- 4TH FLO	OOR						
	PH:							Phone no (215) 297-2100		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d								
	kınd(s) of property sold (e g , real e use, or common stock, 200 shs MLC	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)				
US DEBT INDEX FUND B		Р						
RUSSELL 1000 INDEX FUND E	3		Р					
S/T HPEF TR RUS INDX FD			Р					
S/T HPEF TR US DEBT INX FI)							
L/T HPEF TR RUSS INX FD			Р					
L/T HPEF TR US DEBT INX FO)		Р					
Form 990PF Part IV - Capital	Gains and Losses for Tax on	Investment I	ncome - Colum	ns e - h				
(e) Gross sales price	Depreciation allowed (f) (or allowable)		r other basis pense of sale	Gain or (loss) (h) (e) plus (f) minus (g)				
9,233,100			8,909,231	323,869				
28,307,177			29,262,938	-955,761				
229,149					229,149			
			359	-359				
1,481,908				1,481,908				
			4,529		-4,529			
Form 990PF Part IV - Capital	Gains and Losses for Tax on	Investment I	ncome - Colum	ns i - I				
Complete only for assets show	ring gain in column (h) and owned b	y the foundation	on 12/31/69		(h) gain minus			
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69		ss of col(ı) ol(ʒ), ıf any	col (k), but not less than -0-) or (I) Losses (from col (h))				
				323,869				
				-955,7				
					229,149			
				_	-359			
					1,481,908			
					-4,529			

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation GREGG MELINSON PRES/EXEC DIRECTOR/BOARD MEM 709 G STREET NW 15 WASHINGTON, DC 20001 HENRY GOMEZ RESIGNED BOARD CHAIRMAN 0.5 709 G STREET NW WASHINGTON, DC 20001 KATE HOLDERNESS BOARD MEMBER 05 709 G STREET NW WASHINGTON, DC 20001 BRIAN TIPPENS

JOHN SCHULTZ	BOARD MEMBER	0	0	
709 G STREET NW WASHINGTON, DC 20001	0 5			

BOARD MEMBER

0.5

709 G STREET NW WASHINGTON, DC 20001

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			Amount				
Name and address (home or business)	any foundation manager or substantial contributor	recipient						
a Paid during the year								
AMERICA ONLINE GIVING FOUNDATION PO BOX 1010 SAFETY HARBOR, FL 34695	NONE	PC	HPE GIVES EMPLOYEE MATCHING AND COMMUNITY IMPACT GRANTS	2,402,000				
SILICON VALLEY COMMUNITY FOUNDATION 2440 WEST EL CAMINO REAL SUITE 300 MOUNTAIN VIEW, CA 94040	NONE	PC	HPE GIVES EMPLOYEE MATCHING AND COMMUNITY IMPACT GRANTS	112,500				
WASHINGTON UNIVERSITY	NONE	PC	ENDOWED SCHOLARSHIP FUND	25,000				

FOUNDATION 2440 WEST EL CAMINO REAL SUITE 300 MOUNTAIN VIEW, CA 94040			MATCHING AND COMMUNITY IMPACT GRANTS	,
WASHINGTON UNIVERSITY	NONE	PC	ENDOWED SCHOLARSHIP FUND	25,

MOUNTAIN VIEW, CA 94040				
WASHINGTON UNIVERSITY 1 BROOKINGS DRIVE ST LOUIS, MO 63130	NONE	PC	ENDOWED SCHOLARSHIP FUND	25,00

WASHINGTON UNIVERSITY 1 BROOKINGS DRIVE ST LOUIS, MO 63130	NONE	PC	ENDOWED SCHOLARSHIP FUND	25,00
Total				2,956,167

За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation If recipient is an individual, 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 AMERICAN NATIONAL RED CROSS NONE PC DISASTER RESPONSE PROGRAM 250,000 1663 MARKET STREET

SAN FRANCISCO, CA 94103				
YWCA SILICON VALLEY 375 SOUTH THIRD STREET SAN JOSE, CA 95112	NONE	PC	CURATED PATHWAYS TO INNOVATION	166,667
Total				2,956,167

За

efile GRAPHIC print - DO NOT P	ROCESS A	s Filed Data -		DI	.N: 93491256002169		
TY 2017 Accounting Fees Schedule							
Name: HEWLETT PACKARD ENTERPRISE FOUNDATION							
EIN: 47-5011215							
Accounting Fees Schedule							
Category	Amoui	nt Net	Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		

31,918

63,836

ACCOUNTING FEES

efile GRAPHIC print - DO NOT PR	OCESS	As Filed Data -	DLN: 93491256002169			
TY 2017 Contractor Compensation Explanation						
Name: HEWLETT PACKARD ENTERPRISE FOUNDATION EIN: 47-5011215						
Contractor			Explanation			
BENEVITY	PH:	ILANTHROPIC CO	NSULTING			
GOLDMAN SACHS	IN۱	/ESTMENT ADVIS	ORY MANAGEMENT			

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93491256002169 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. TY 2017 Depreciation Schedule

Name: HEWLETT PACKARD ENTERPRISE FOUNDATION EIN: 47-5011215

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491256002169						
TY 2017 Investments Corporate Bonds Schedule								
Name:	HEWLETT PACKAI	RD ENTERPRISE FOUNDATION						

21,094,990

21,094,990

EIN: 47-5011215 **Investments Corporate Bonds Schedule** Name of Bond **End of Year Book** End of Year Fair Value Market Value

GS FIXED INCOME

FV 2017 Investments Comparate Charle Cabadula	
TY 2017 Investments Corporate Stock Schedule	

Name: HEWLETT PACKARD ENTERPRISE FOUNDATION

ETAL 47 FO1131F

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

GS MARKETABLE SECURITIES

	EIN: 4/-3011213					
	Name of Stock	End of Year Book	End			
ı		Value	Ma			

43,242,156

DLN: 93491256002169

d of Year Fair

Market Value

43,242,156

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491256002169
TY 2017 Investments - Other S	Schedule			
Name:	HEWLETT PACKA	RD ENTERPRIS	SE FOUNDATION	
EIN: 4	47-5011215			
Investments Other Schedule 2				
Category/ Item	Liste	ed at Cost or FMV	Book Value	End of Year Fair Market Value
RUSSELL 1000 IND-HPEF 2016 TR	FMV		0	

FMV

US DEBT IND- HPEF 2016 TR

efile GRAPHIC print - DO NOT PROCES	S As Filed Data	- DLN: 93491256002169					
TY 2017 Legal Fees Schedu	TY 2017 Legal Fees Schedule						
Nan	ne: HEWLETT PA	ACKARD ENTERPRI	SE FOUNDATION				
EI	EIN: 47-5011215						
Category	Amount	Net Investment	Adjusted Net	Disbursements			
		Income	Income	for Charitable Purposes			
LEGAL FEES	1,320			1,320			

Description

Name: HEWLETT PACKARD ENTERPRISE FOUNDATION

DEFERRED TAX ASSET

EIN: 47-5011215

Other Assets Schedule

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

Beginning of Year -

Book Value

21,218

End of Year - Book

43,106

Value

DLN: 93491256002169

End of Year - Fair

Market Value

43,106

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491256002169			
TY 2017 Other Decreases Schedule						
Name: HEWLETT PACKARD ENTERPRISE FOUNDATION						
EIN: 47-5011215						
De	escription		Amount			
UNREALIZED GAIN ON INVESTMENTS			1,754,396			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491256002169	
TY 2017 Other Expenses Schedule					
Name	: HEWLETT PACK	ARD ENTERPRIS	E FOUNDATION		
EIN: 47-5011215					
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
EMPLOYEE CASH MATCH PRG FEE	205,443			175,880	
STATE ANNUAL FILING FEES	444			444	

22,713

34,662

OTHER PORTF DED HPEF TR RUS

OTHER PORTF DED HPEF TR US DE

Name: HEWLETT PACKARD ENTERPRISE FOUNDATION

DLN: 93491256002169

EIN: 47-5011215

Other Income Schedule					
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income		
OTHER INCOME HPEF TR- RUSS IND FD		1,133			
OTHER INCOME HPEF TR- US DEBT IND FD		3			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491256002169	
TY 2017 Other Increases Schedule				
Name:	HEWLETT PAC	KARD ENTERPRISE FOUNDAT	ION	
EIN:	47-5011215			
De	escription		Amount	
DEFERRED TAX ADJUSTMENT			21,888	
UNREALIZED G/L ON BLACKRCK IND FUI	NDS		223,878	

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491256002169 TY 2017 Other Professional Fees Schedule						
Name: HEWLETT PACKARD ENTERPRISE FOUNDATION EIN: 47-5011215						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		

83,871

83,871

INVESTMENT MANAGEMENT FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	-	DLI	N: 93491256002169	
TY 2017 Taxes Schedule					
Name:	HEWLETT PA	CKARD ENTERPRI	SE FOUNDATION		
EIN: 47-5011215					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
Category FEDERAL EXCISE TAXES	Amount 52,000		_	for Charitable	

efile GRAPHIC print -	DO NOT PROCESS	As Filed Data -				DLN: 93491256002169
Schedule B		Schedu	ule of Contributors	ı		OMB No 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Information a	bout Schedule B (F	Form 990, 990-EZ, or 990-PF Form 990, 990-EZ, or 990-PF) a wwwwwwwwwwwwwwwwwwwwwwwwwwwwwwwwwwww		ons is at	2017
Name of the organizat HEWLETT PACKARD ENT		l			Employer id	lentification number
		•			47-5011215	
Organization type (ch	eck one)					
Filers of:	Section:					
Form 990 or 990-EZ	☐ 501(c)() (enter number) c	organization			
	☐ 4947(a)(1) nonexempt char	ritable trust not treated as a	prıvate founda	tion	
	☐ 527 politic	cal organization				
Form 990-PF	✓ 501(c)(3)	exempt private fo	undation			
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
			PF that received, during the omplete Parts I and II See			
Special Rules						
under sections received from a	509(a)(1) and 170(b)	(1)(A)(vı), that che urıng the year, tota	g Form 990 or 990-EZ that n cked Schedule A (Form 990 al contributions of the greate plete Parts I and II	or 990-EZ), P	art II, line 13,	16a, or 16b, and that
during the year	total contributions of	more than \$1,000	or (10) filing Form 990 or 9 0 <i>exclusively</i> for religious, ch animals Complete Parts I,	naritable, scient		
during the year If this box is che purpose Don't	, contributions <i>exclusi</i> ecked, enter here the complete any of the p	ively for religious, total contributions parts unless the G	or (10) filing Form 990 or 9 charitable, etc., purposes, be that were received during teneral Rule applies to this cormore during the year.	ut no such con he year for an organization be	itributions tota exclusively re cause it recei	led more than \$1,000 ligious, charitable, etc , ved <i>nonexclusively</i>
990-EZ, or 990-PF), bu	it it must answer "No'	on Part IV, line 2	lle and/or the Special Rules , of its Form 990, or check t it it doesn't meet the filing re	he box on line	H of its	
For Paperwork Reduction for Form 990, 990-EZ, or 9		ructions	Cat No 30613X	Schedu	ıle B (Form 990	, 990-EZ, or 990-PF) (2017)

Name of organi HEWLETT PACKA	ization RD ENTERPRISE FOUNDATION	Employer identification 47-5011215	number
Part I	Contributors (See instructions) Use duplicate copies of Part I if a	dditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	HEWLETT PACKARD ENTERPRISE COMPANY 3000 HANOVER STREET	\$ 10,000,000	Person Payroll Noncash
	PALO ALTO, CA 94304		(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	contributions) (d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	contributions) (d) Type of contribution
-			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions) orm 990, 990-EZ, or 990-PF) (2017)

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