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DLN: 93491316016839

2018

OMB No 1545-0052

Return of Private Foundation

Form 990-PF

Department of the Treasury

Internal Revenue Service

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. ▶ Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

For	caler	ndar year 2018, or tax year beginning 01-01-20	18 , ar	nd ending 12-31-	2018	
		undation		A Employer id	entification numbe	r
		or All Foundation		26-0143833		
Num	ber and	d street (or P O box number if mail is not delivered to street address)	Room/suite	B Telephone nu	mber (see instruction	ns)
F	oundatio	on Source 501 Silverside Rd		(800) 839-1754	·	,
		n, state or province, country, and ZIP or foreign postal code , DE 198091377	1	C If exemption	application is pendin	g, check here
	aeck al	Il that apply	former public charity	D 1 Foreign or	ganizations, check he	ere \Box
u c.	icek ui	☐ Final return ☐ Amended return	former public charity		ganizations meeting	▶ ⊔
		Address change Name change			k here and attach co	
H C	neck tv	/pe of organization ✓ Section 501(c)(3) exempt private f	foundation		undation status was t	
_		a 4947(a)(1) nonexempt charitable trust \square Other taxable		under sectio	n 507(b)(1)(A), chec	k nere
			☑ Cash ☐ Accru		ation is in a 60-mont	
		from Part II, col (c), ▶\$ 818,998 (Part I, column (d) must	be on cash basıs)	under sectio	n 507(b)(1)(B), chec	k here • L
Pa	rt I	Analysis of Revenue and Expenses (The total				(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach	0			
	2	schedule) Check ▶ ☑ If the foundation is not required to attach				
		Sch B				
	3	Interest on savings and temporary cash investments	204	204		
a	4	Dividends and interest from securities	6,679	6,679		
	5a	Gross rents				
	b	Net rental income or (loss)				
Ĕ	6a	Net gain or (loss) from sale of assets not on line 10	44,759			
Revenue	b	Gross sales price for all assets on line 6a 109,185				
ž	7	Capital gain net income (from Part IV, line 2)		44,759		
	8	Net short-term capital gain				
	9	Income modifications				
	10a b	Gross sales less returns and allowances Less Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	1,		9 648	648		
	12	Total. Add lines 1 through 11	52,290			
	13	Compensation of officers, directors, trustees, etc	0	· ·		
	14	Other employee salaries and wages				
w	15	Pension plans, employee benefits				
Se	16a	Legal fees (attach schedule)				
<u> </u>	ь	Accounting fees (attach schedule)				
EX	C	Other professional fees (attach schedule)	2,047	2,047		
and Administrative Expenses	17	Interest	_,	_,,,,,,		
rat	18	Taxes (attach schedule) (see Instructions)	9 500			
) St	19	Depreciation (attach schedule) and depletion	300			
<u>=</u>	20	Occupancy				
Ad	21	Travel, conferences, and meetings				
m	22	Printing and publications				
g Đị	23	Other expenses (attach schedule)	12,885	5,128		7,757
Operating	24	Total operating and administrative expenses.	<u> </u>			
ær	l	Add lines 13 through 23	15,432	7,175		7,757
Ö	25	Contributions, gifts, grants paid	92,000			92,000
	26	Total expenses and disbursements. Add lines 24 and 25	107.422	7 475		00.757
	27	Subtract line 26 from line 12	107,432	7,175		99,757
	a	Excess of revenue over expenses and				
		disbursements	-55,142			
	b	Net investment income (if negative, enter -0-)		45,115		
	С	Adjusted net income (If negative, enter -0-)		<u> </u>	<u> </u>	
ror	raper	work Reduction Act Notice, see instructions.		Cat No 11289	≺ For	m 990-PF (2018)

197,921

507.890

507,890

507.890

507,890

193,200

452.748

452,748

452.748

452,748

2

3

4

5

507,890

-55,142

452,748

452,748

Form **990-PF** (2018)

544,124

818,998

Investments—corporate bonds (attach schedule)

Accounts payable and accrued expenses

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

Mortgages and other notes payable (attach schedule).

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 ▶

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

Enter amount from Part I, line 27a

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-

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

Investments—land, buildings, and equipment basis ▶ _

Less accumulated depreciation (attach schedule) ▶ ___

Less accumulated depreciation (attach schedule)

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

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe -_

Grants payable

Unrestricted

Temporarily restricted

Permanently restricted . .

and complete lines 27 through 31.

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

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) -

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2	ε
ASSEL	9
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C

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17 18

19

20 21

22

23

24

25

26

28

29 Net 30

31

Part III

2 3

Liabilities

Balances

Fund

ō

Assets 27

	e the kınd(s) of property sold (e g , arehouse, or common stock, 200 shs	How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	Date sold (mo , day, yr)	
1 a Publicly-traded Securities	5		2 201141011		
b Passthrough K1 Capital G					
С	, (2000)				
d					
e			,	-	
(e)	(f) Depreciation allowed	(g Cost or ot			h)
Gross sales price	(or allowable)	plus exper			r (loss)) minus (g)
2 10	9,185	ріаз ехреі	62,809	(c) plus (l)	46,376
	13,103		02,009		
b					-1,617
С					
d					
e					
Complete only for assets	s showing gain in column (h) and ow	ned by the foundation or	n 12/31/69	(I)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess o over col	of col (ı)	Gains (Col (Ì	h) gain minus less than -0-) or
a					46,376
b					
c					
d					
e		Tf D.			
2 Capital gain net income	or (net capital loss)	If gain, also enter in Pai If (loss), enter -0- in Pa		2	44,759
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		ı l	,	
in Part I, line 8			} [3	
Part V Qualification l	Jnder Section 4940(e) for Re	duced Tax on Net I	nvestment Inc	ome	
	rivate foundations subject to the sec				
(Tor optional use by domestic p	invate roundations subject to the set	ector 13 to(a) cax on hec	mivestiment meoni	- ,	
If section 4940(d)(2) applies, le	eave this part blank				
	a acation 4043 tax on the distinction	hla amaannak af amnaan			es 🔽 No
	e section 4942 tax on the distributa ot qualify under section 4940(e) Do		n the base period?	1€	35 <u>1</u> NO
	nount in each column for each year,		making any entries		
(a)	Tourism each column for each year,	See ilistructions before i	I I I I I I I I I I I I I I I I I I I	(d)	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable	-use assets	Distribution ration (col (b) divided by co	
2017	352,899		913,575	(cor (b) divided by co	0 386284
2017	397,285		1,148,305		0 345975
2015	488,147		1,635,405		0 298487
2014	118,353		1,860,946		0 063598
2013	197,314		1,746,037		0 113007
2 Total of line 1, column (d)		2		1 207351
	for the 5-year base period—divide				
	ndation has been in existence if less		3		0 24147
4 Enter the net value of no		4		832,189	
					200,949
6 Enter 1% of net investme			451		
					201,400
8 Enter qualifying distributi	ons from Part XII, line 4 ,		8		99,757
	eater than line 7, check the box in Pa			g a 1% tax rate Se	e the Part VI
instructions					
				Fo	rm 990-PF (2018)

Page **6**

5a During the year did the foundation pay or incur any amount to							Yes	No
	(1) Carry on propaganda, or otherw	ise attempt to influence legis	lation (section 4945(e))?	Yes	✓ No			
	(2) Influence the outcome of any sp	ecific public election (see sec	tion 4955), or to carry					
	on, directly or indirectly, any vo			· · · Yes	✓ No			
	(3) Provide a grant to an individual		•	☐ Yes	✓ No			
	(4) Provide a grant to an organization		· -					
	in section 4945(d)(4)(A)? See in			· · Yes	✓ No			
	(5) Provide for any purpose other th	- ·	* **	_	_			
L	educational purposes, or for the			⊔ Yes	✓ No			
U	If any answer is "Yes" to 5a(1)–(5), Regulations section 53 4945 or in a					5b		
	Organizations relying on a current n			_		30		
С	If the answer is "Yes" to question 5a				Ш			
·	·	• • •	·					
	tax because it maintained expenditure responsibility for the grant? Yes No If "Yes," attach the statement required by Regulations section 53 4945–5(d)							
6 a	Did the foundation, during the year,	· -		ime on				
Va	a personal benefit contract?							
ь	Did the foundation, during the year,			L Yes	✓ No	6b		No
	If "Yes" to 6b, file Form 8870	pay premiums, uncerty or me	an eetry, on a personal be	TICHE CONGRESS 1	•	05		110
7a	At any time during the tax year, was	the foundation a party to a i	prohibited tax shelter trai	nsaction?				
	If yes, did the foundation receive an			⊔ Yes	✓ No	7b		
8	Is the foundation subject to the sect	• •				1.5		
•	excess parachute payment during th							
		Officers, Directors, Trus		<u> </u>				
Pai	and Contractors	incers, Directors, Trus	tees, Foundation Me	iliageis, nigiliy Fai	u Emp	Oyees,	'	
_	List all officers, directors, trustee			Cas in atomaticae				
1	List all officers, directors, trustee	(b) Title, and average	(c) Compensation (If	(d) Contributions to	<u>, T.</u>	_		
	(a) Name and address	hours per week	not paid, enter	employee benefit plans		e) Exper other a		
		devoted to position	-0-)	deferred compensati	on	otilei a	llowani	
See /	Addıtıonal Data Table							
	Compensation of five highest-pai	d employees (other than t	hose included on line :			enter "	NONE	•"
(a)	Name and address of each employee	naid (b) Title, and average		(d) Contributions t employee benefit) Expen	se acco	nunt
(4)	more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		other al		
		devoted to position		compensation				
Tota	I number of other employees paid over	er \$50,000	<u> </u>					
					F	orm 99	0-PF	(2018

Form 990-PF (2018)		Page 7
Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly P	aid Employees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services		>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rele organizations and other beneficiaries served, conferences convened, research papers produ		er of Expenses
1	,	
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see	netructions)	
Part IX-B Summary of Program-Related Investments (see I Describe the two largest program-related investments made by the foundation during the	<u> </u>	Amount
1		7 WITO GITE
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		•
<u> </u>		Form 990-PF (2018)

5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here a	nd on Part V, line 4	5	832,189
6	Minimum investment return. Enter 5% of line 5		6	41,609
	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) pr	vate operating foundations	and ce	rtain foreign
Par	organizations check here ► □ and do not complete this part)			
1	Minimum investment return from Part X, line 6		1	41,609
2a	Tax on investment income for 2018 from Part VI, line 5	a 902	!	
b	Income tax for 2018 (This does not include the tax from Part VI) 2	b		
С	Add lines 2a and 2b		2c	902

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

6

1a

1b

2

3a 3h

4

5

40.707

99,757

99.757

99,757

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0

Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . .

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

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

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

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

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

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

6

1

2

3

4

5

Part XII

2018

Page 9

40,707

40.707

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T	a	rt	XI	11	1		ī

Form 9

90-PF	(2	01	8)	
VIII	Į		-		

b Total for prior years

d From 2016. . . .

a From 2013.

e From 2017.

b From 2014. . . . c From 2015. . .

PF (20	018)		
• • •	Undistributed Income	(see instructions)	

2016, 2015, 2014

113.358 27,930

408 281

340.858 308,598

(2	018)
	Undistributed Income (see instructions

Distributable amount for 2018 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2018 a Enter amount for 2017 only.

Excess distributions carryover, if any, to 2018

f Total of lines 3a through e.

d Applied to 2018 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the

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

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

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . .

c Excess from 2016. . . .

d Excess from 2017. . .

e Excess from 2018. . .

b Excess from 2015. .

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 2017 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019 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 2013 not

indicated below:

4 Qualifying distributions for 2018 from Part XII, line 4 🕨 \$ a Applied to 2017, 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

.8)	
Undistributed Income (see instru-	ction

(a)

Corpus

1.199.025

59.050

1,258,075

113.358

1,144,717

27.930

408,281

340.858

308.598

59.050

(b)

Years prior to 2017

(c)

2017



Part X	/I-A Analysis of Income-Producing	Activities				
	ss amounts unless otherwise indicated	Unrelated b	usiness income	· ·	n 512, 513, or 514	(e) Related or exempt
_	am service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
	s and contracts from government agencies pership dues and assessments					
3 Inter	est on savings and temporary cash tments			14	204	
	ends and interest from securities ental income or (loss) from real estate			14	6,679	
a Deb	t-financed property					
	debt-financed property					
	ental income or (loss) from personal property					
	rinvestment income or (loss) from sales of assets other than					
ınven	· · ·			18	44,759	
9 Net ir	ncome or (loss) from special events				•	
	s profit or (loss) from sales of inventory					
	revenue					
	Inc/Loss			14	648	
12 Subto	otal Add columns (b), (d), and (e)				52,290	
	l. Add line 12, columns (b), (d), and (e)			1	.3	52,290
(See)	worksheet in line 13 instructions to verify calcu VI-B Relationship of Activities to the		hmant of Evam	nt Durmages		
Part A	Explain below how each activity for which				utad impartantly to	
Line No ▼	the accomplishment of the foundation's ex instructions)					
	-					
	L				F-	000-BE (2018)

orm 990-PF (Pa	ge 13
Part XVII	Information Re Exempt Organiz		ansfers To a	and Transactio	ns and Relatio	onships With Noncha	ritable		
	ganization directly or inc than section 501(c)(3) o					on described in section 50	1	Yes	No
a Transfers f	rom the reporting found	dation to a no	oncharitable exe	empt organization	of				
							1a(1)		No
(2) Other	assets						1a(2)		No
b Other trans									
` '	of assets to a noncharit	•	-				1b(1)		No
	ases of assets from a ne						1b(2)		No
	l of facilities, equipmen oursement arrangement	•					1b(3) 1b(4)		No No
	or loan guarantees.						1b(5)		No
	mance of services or me						1b(6)		No
• •	facilities, equipment, m	•	-				1c		No
d If the answ	ver to any of the above	ıs "Yes," com	plete the follow	ving schedule Col	umn (b) should a	lways show the fair marke			
		ngement, sho		i) the value of the	goods, other ass	ed less than fair market va ets, or services received f transfers, transactions, and s		ngemen	nts
\	,	(2,		3	(-,				
described i	dation directly or indire n section 501(c) (other	than section	,	•	, ,	_	☑ No		
b If "Yes," co	omplete the following so (a) Name of organization		(1) Type of organization	on	(c) Description of rela	itionship		
			,						
of my which		ıt ıs true, co				ring schedules and stateme than taxpayer) is based o			
Sign Here	****			2019-11-05	*****	reti with	the prepa		
, s	Signature of officer or tr	ustee		Date	Title	beld (see	e instr)? [✓ Yes	□ _{No}
	Print/Type preparer's	name	Preparer's Sigr	nature	Date	Check if self-	P0134!	5770	
Paid	Jeffrey D Haskell					employed ▶ Ш			
Preparer Use Only	Firm's name ► Found	dation Source	e			Firm's	EIN ►		
		e Hollow Ln S				Phone	no (800) 839-	1754
	1	, .							

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, Contributions to (e) other allowances hours per week not paid, enter (b) devoted to position employee benefit plans -0-) and deferred

			compensation	
Pamela Weiss	Pres, Dir, Sec	0	0	0
Foundation Source 501 Silverside Rd Wilmington, DE 198091377	10			

Wilmington, DE 198091377				
Scott Weiss	VP	0	0	0
Foundation Source 501 Silverside Rd Wilmington, DE 198091377	10			

Foundation Source 501 Silverside Rd Wilmington, DE 198091377				
Zach Weiss	VP	0	0	0
Foundation Source 501 Silverside Rd Wilmington, DE 198091377] 1 0			

			l .	l
Zach Weiss	VP	0	0	0
Foundation Source 501 Silverside Rd Wilmington, DE 198091377	10			
Zeta Weiss	VP	0	0	0
	110			

Foundation Source 501 Silverside Rd Wilmington, DE 198091377				
Zeta Weiss	VP	0	0	0
Foundation Source 501 Silverside Rd	1 0			

				i
Zeta Weiss	VP	0	0	0
Foundation Source 501 Silverside Rd Wilmington, DE 198091377	1 0			

Zoo Wolss	VD			
Foundation Source 501 Silverside Rd Wilmington, DE 198091377	10			
zeta weiss	VP		١	

10

Foundation Source 501 Silverside Rd Wilmington, DE 198091377

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

Pamela Weiss

Scott Weiss

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

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

or substantial contributor

Name and address (home or business)

Total .

	or substantial continuator			
a Paid during the year				
BATTERY FOUNDATION400 PACIFIC AVE SAN FRANCISCO, CA 94133	N/A	PC	General & Unrestricted	4,000

FIRST CONCREGATIONAL CHURCH OF	N/4	20	C: 11 C 2010	
650 CLARK WAY PALO ALTO, CA 94304				
CHILDRENS HEALTH COUNCIL INC	N/A	PC	Charitable Event	

650 CLARK WAY PALO ALTO, CA 94304				
FIRST CONGREGATIONAL CHURCH OF PALO ALTO 1985 LOUIS RD	N/A	PC	Stewardship Campaign 2018 fund	5,000

500

92,000

PALO ALTO, CA 94304				
FIRST CONGREGATIONAL CHURCH OF PALO ALTO 1985 LOUIS RD PALO ALTO, CA 94303	N/A	PC	Stewardship Campaign 2018 fund	5,000

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

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

a Paid during the year				
LIFEMOVES181 CONSTITUTION DR MENLO PARK, CA 94025	N/A	PC	General & Unrestricted	75,000
LIFEMOVES181 CONSTITUTION DR	N/A	PC	Charitable Event	2,500

FEMOVES181 CONSTITUTION DR ENLO PARK, CA 94025	N/A	PC	Charitable Event	
FEMOVES181 CONSTITUTION DR	N/A	PC	Charitable Event	

Total .

MENLO PARK, CA 94025	,			ĺ
LIFEMOVES181 CONSTITUTION DR	N/A	PC	Charitable Event	5,

MENLO PARK, CA 94025				
LIFEMOVES181 CONSTITUTION DR	N/A	PC	Charitable Event	5,000
MENI O DADIZ CA GAGGE				1

LIFEMOVES181 CONSTITUTION DR	N/A	PC	Charitable Event	5,000
MENLO PARK, CA 94025				

92,000

TILEMONESTOT COMPLITION DK	IN/A	PC	Charitable Event	3,0
MENLO PARK, CA 94025				

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Name: Just Us For All Foundation EIN: 26-0143833

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TY 2018 Investments Corporate Stock Schedule

Name: Just Us For All Foundation

EIN: 26-0143833		
Investments Corporation Stock Schedule		
Name of Stock	End of Year Book Value	End of Year Fair Market Value
ISHARES MSCI EMERGING MARKETS	6,227	7,421
ISHARES RUSSELL 2000 GROWTH IN	2,390	3,024
ISHARES RUSSELL MIDCAP G IN FD	5,092	6,368
ISHARES RUSSELL MIDCAP VALUE	5,412	5,955
ISHARES SHORT MATURITY BOND ET	14,757	14,656
ISHARES SHORT TERM CORPORATE B	14,028	13,736
ISHARES TRUST MSCI EAFE INDEX	31,992	33,975
ISHARES TRUST RUSSELL 1000 GRO	16,109	26,706
ISHARES TRUST RUSSELL 1000 VAL	20,005	22,876
ISHARES TRUST RUSSELL 2000 VAL	2,508	2,689
PIMCO 0-5 YEAR H/Y CORP BOND	15,084	13,412
PIMCO ENHANCED SHORT MATURITY	13,999	13,931
VANGUARD SHORT TERM CORPORATE	14,112	13,717
VANGUARD SHORT TERM INFLATION	14,291	13,801

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491316016839			
TY 2018 Investments Governr	TY 2018 Investments Government Obligations Schedule					
Name:	Just Us For All	l Foundation				
EIN:	26-0143833					
US Government Securities - End of Year Book Value:		22,100				
US Government Securities - End of Year Fair Market Value:		21,165				
State & Local Government Securities - End of Year Book Value:						
State & Local Government Securities - End of Year Fair Market Value:						

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TY 2018 Investments - Other	Schodulo	_
11 2016 lilvestillents - Other	Scriedule	
Name	Just Us For All Fo	oundation
		Januacion
ETIN:	26-0143833	

361,775

126,643

Investments Other Schedule 2						
Category/ Ite	∍m	Listed at Cost or FMV	Book Value	End of Year Fair Market Value		
AH PARALLEL FUND III-B, L.P.			66,557	182,349		

ANDREESSEN HOROWITZ FUND III-B

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data -		DLI	N: 93491316016839
TY 2018 Other Expenses S	Schedule			
Na	me: Just Us For All F	oundation		
E	IN: 26-0143833			
Other Expenses Schedule				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Administrative Fees	7,732			7,732
K-1 Exp AH PARALLEL FUND III-B	1.377	1.377		

3,751

25

3,751

25

K-1 Exp ANDREESSEN HOROWITZ FU

State or Local Filing Fees

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Name: Just Us For All Foundation

EIN: 26-0143833

Other Income Schedule					
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income		
K-1 Inc/Loss AH PARALLEL FUND III-B, L P	423	423			
K-1 Inc/Loss ANDREESSEN HOROWITZ FUND III-B, L P	225	225			

DLN: 93491316016839

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491316016839 TY 2018 Other Professional Fees Schedule				
	ne: Just Us For <i>A</i> IN: 26-0143833			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

2,047

2,047

Investment Management Services

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DL	N: 93491316016839
TY 2018 Taxes Schedule				_
Name	: Just Us For A	All Foundation		
EIN:	26-0143833			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
990-PF Estimated Tax for 2018	500			

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93491316016839 **Underpayment of Estimated Tax by Corporations** OMB No 1545-0123 Form **2220** Department of the Treasury Attach to the corporation's tax return. ▶ Go to www.irs.gov/FORM2220 for instructions and the latest information. Internal Revenue Service **Employer identification number** Just Us For All Foundation Note: Generally, the corporation isn't required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38 on the estimated tax penalty line of the corporation's income tax return, but do not attach Form 2220 Required Annual Payment Total tax (see instructions) 902 2a Personal holding company tax (Schedule PH (Form 1120), line 26) b Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income **c** Credit for federal tax paid on fuels (see instructions) **Total.** Add lines 2a through 2c 2d Subtract line 2d from line 1 If the result is less than \$500, do not complete or file this form The corporation doesn't owe the penalty 902 Enter the tax shown on the corporation's 2017 income tax return. See instructions. Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 4 689 Required annual payment. Enter the smaller of line 3 or line 4 If the corporation is required to skip line 4, enter the amount from line 3 689 Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation must file Form 2220 even if it doesn't owe a penalty. See instructions. The corporation is using the adjusted seasonal installment method The corporation is using the annualized income installment method The corporation is a "large corporation" figuring its first required installment based on the prior year's tax Figuring the Underpayment (a) (b) (c) (d) Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year . 9 05-15-2018 06-15-2018 09-17-2018 12-17-2018 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Schedule A, line 38 If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0 25) of line 5 above in each column 10 11 Estimated tax paid or credited for each period For column (a) only, enter the amount 911 500 from line 11 on line 15 See instructions 11 Complete lines 12 through 18 of one column before going to the next column. Enter amount, if any, from line 18 of the preceding column 911 911 911 911 1,411 Add lines 11 and 12 13 13 Add amounts on lines 16 and 17 of the preceding column 14 15 Subtract line 14 from line 13 If zero or less, enter -0-. . 911 911 15 1,411 If the amount on line 15 is zero, subtract line 13 from line 14 Otherwise, enter -0- . 16 Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10 Then go to line 12 of the next column Otherwise, go to line 18. 17 Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column . . . 911 911 Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17—no penalty is owed. For Paperwork Reduction Act Notice, see separate instructions

Figuring the Penalty

Enter the date of payment or the 15th day of

Part IV

33

34

35

36

37

38

(d)

	whichever is earlier (C Corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month) See instructions	19		
20	Number of days from due date of installment on line 9 to the date shown on line 19	20		
21	Number of days on line 20 after 4/15/2018 and before 7/1/2018	21		
22	Underpayment on line 17 x <u>Number of days on line 21</u> x 5% (0 05) 365	22	\$ \$	\$ \$
23	Number of days on line 20 after 6/30/2018 and before 10/1/2018	23		
24	Underpayment on line 17 x <u>Number of days on line 23</u> x 5% (0 05) 365	24	\$ \$	\$ \$
25	Number of days on line 20 after 9/30/2018 and before 1/1/2019	25		
26	Underpayment on line 17 x <u>Number of days on line 25</u> x 5% (0 05) 365	26	\$ \$	\$ \$
27	Number of days on line 20 after 12/31/2018 and before 4/1/2019	27		
28	Underpayment on line 17 x <u>Number of days on line 27</u> x 6% (0 06) 365	28	\$ \$	\$ \$
29	Number of days on line 20 after 3/31/2019 and before 7/1/2019	29		
30	Underpayment on line 17 x Number of days on line 29 x *% 365	30	\$ \$	\$ \$
31	Number of days on line 20 after 6/30/2019 and before 10/1/2019	31		
32	Underpayment on line 17 x Number of days on line 31 x *% 365	32	\$ \$	\$ \$

\$

*Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet,

\$

\$

Form 2220 (2018)

38

(a)

(b)

(c)

Number of days on line 20 after 9/30/2019

Number of days on line 20 after 12/31/2019 and before 3/16/2020

Add lines 22, 24, 26, 28, 30, 32, 34, and 36

33

34

35

36 \$

access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information

\$ 37

Penalty. Add columns (a) through (d) of line 37 Enter the total here and on Form 1120, line 33, or the

and before 1/1/2020

Underpayment on line 17 x Number of days on line 33 x *%

Underpayment on line 17 x Number of days on line 35 x *%

365

zero or less, enter -0-

Schedule A Adjusted Seasonal Installment Method and Annualized Income Installment Method See instructions.

Part I Adjusted Seasonal Installment Method Caution: Use this method only if the base p instructions.	erıod	percentage for a	ny 6 consecutive r	months is at least	70%. See
mscructions.		(a)	(b)	(c)	(d)
1 Enter taxable income for the following periods		First 3 months	First 5 months	First 8 months	First 11 months
aTax year beginning in 2015	1 _a				1
bTax year beginning in 2016	1b				
cTax year beginning in 2017	1c				
2 Enter taxable income for each period for the tax year	1				
beginning in 2018 See instructions for the treatment of extraordinary items	2				
3 Enter taxable income for the following periods		First 4 months	First 6 months	First 9 months	Entire year
a Tax year beginning in 2015	3a				
b Tax year beginning in 2016	3b				
c Tax year beginning in 2017	3с				
4 Divide the amount in each column on line 1a by the					
amount in column (d) on line 3a	4				
5 Divide the amount in each column on line 1b by the amount in column (d) on line 3b	5				
6 Divide the amount in each column on line 1c by the amount in column (d) on line 3c	6				
7 Add lines 4 through 6	7				
8 Divide line 7 by 3 0	8				
9aDivide line 2 by line 8	9a				
${f b}$ Extraordinary items (see instructions)	9Ь				
c Add lines 9a and 9b	9c				
.0 Figure the tax on the amount on line 9c using the instructions for Form 1120, Schedule J, line 2 or comparable line of corporation's return	10				
1a Divide the amount in columns (a) through (c) on line 3a by the amount in column (d) on line 3a	11a				
b Divide the amount in columns (a) through (c) on line 3b by the amount in column (d) on line 3b	11b				
c Divide the amount in columns (a) through (c) on line 3c by the amount in column (d) on line 3c	11c				
.2 Add lines 11a through 11c	12				
.3 Divide line 12 by 3 0	13				
.4 Multiply the amount in columns (a) through (c) of line 10 by columns (a) through (c) of line 13 In column (d), enter the amount from line 10, column (d)	14				
L5 Enter any alternative minimum tax for each payment period See instructions	15				
L6 Enter any other taxes for each payment period See instructions	16				
L 7 Add lines 14 through 16	17				
1.8 For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions	18				
19 Total tax after credits Subtract line 18 from line 17 If zero or less. enter -0-	19				

1 33333

5,428

5,428

109

109

109

172

516

688

Form 2220 (2018)

100%

installment

months

(b)

First 3

months

50%

2nd

installment

172

172

344

(a)

First 2

months

0

6

20

21

22

23a

23b

23c

24

25

26 27

28

29

30

31

32

33

34

35

36

37

38

25%

1st

installment

172

172

(c)

First 6

months

6,043

6,043

121

121

121

172

344

516

75%

3rd

installment

Page 4

Part II	Annuali
Form 2220	(2018)

Form 2220	(2018)
Part II	Annualized Income Installment Method

20 Annualization periods (see instructions)

21 Enter taxable income for each annualization period. See instructions for the treatment of extraordinary items

22 Annualization amounts (see instructions)

23a Annualized taxable income Multiply line 21 by line 22

24 Figure the tax on the amount on line 23c using the instructions for Form 1120, Schedule J, line 2, or comparable line of corporation's return

25 Enter any alternative minimum tax for each payment period (see instructions)

26 Enter any other taxes for each payment period. See

27 Total tax Add lines 24 through 26

29 Total tax after credits Subtract line 28 from line 27 If

31 Multiply line 29 by line 30

32 If only Part I or Part II is completed, enter the amount in each column from line 19 or line 31. If both parts are completed, enter the smaller of the amounts in each

33 Add the amounts in all preceding columns of line 38 See

installments. Subtract line 33 from line 32 If zero or

36 Subtract line 38 of the preceding column from line 37 of

38 Required installments. Enter the smaller of line 34 or line 37 here and on page 1 of Form 2220, line 10 See

.

35 Enter 25% (0 25) of line 5 on page 1 of Form 2220 in each column Note: "Large corporations," see the instructions for line 10 for the amounts to enter .

34 Adjusted seasonal or annualized income

Note: Complete lines 32 through 38 of one column before

28 For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c See instructions

b Extraordinary items (see instructions) .

c Add lines 23a and 23b . . .

instructions

zero or less, enter -0-

30 Applicable percentage

Part IIII Required Installments

completing the next column

the preceding column

37 Add lines 35 and 36

instructions