

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value			
Assets	1	Cash—non-interest-bearing					
	2	Savings and temporary cash investments	1,862,110	1,787,429	1,787,429		
	3	Accounts receivable ▶ <u>30,500</u>					
		Less allowance for doubtful accounts ▶ _____	1,630	30,500	30,500		
	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 ▶ _____					
	8	Inventories for sale or use	26,257	16,587	16,587		
	9	Prepaid expenses and deferred charges					
	10a	Investments—U S and state government obligations (attach schedule)					
	b	Investments—corporate stock (attach schedule)					
	c	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)	10,603,641	9,812,550	9,812,550			
14	Land, buildings, and equipment basis ▶ _____						
	Less accumulated depreciation (attach schedule) ▶ _____						
15	Other assets (describe ▶ _____)						
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	12,493,638	11,647,066	11,647,066			
Liabilities	17	Accounts payable and accrued expenses	8,743	11,457			
	18	Grants payable					
	19	Deferred revenue					
	20	Loans from officers, directors, trustees, and other disqualified persons					
	21	Mortgages and other notes payable (attach schedule).					
	22	Other liabilities (describe ▶ _____)					
	23	Total liabilities (add lines 17 through 22)	8,743	11,457			
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ ☒ and complete lines 24 through 26 and lines 30 and 31.						
	24	Unrestricted	12,484,895	11,635,609			
	25	Temporarily restricted					
	26	Permanently restricted					
	Foundations that do not follow SFAS 117, check here ▶ ☐ and complete lines 27 through 31.						
	27	Capital stock, trust principal, or current funds					
	28	Paid-in or capital surplus, or land, bldg , and equipment fund					
	29	Retained earnings, accumulated income, endowment, or other funds					
	30	Total net assets or fund balances (see instructions)	12,484,895	11,635,609			
	31	Total liabilities and net assets/fund balances (see instructions) .	12,493,638	11,647,066			

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	12,484,895
2	Enter amount from Part I, line 27a	2	85,481
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	12,570,376
5	Decreases not included in line 2 (itemize) ▶ _____	5	934,767
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	11,635,609

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a ISHARES TRUST PREFERRED SECURITIES		2017-01-17	2018-05-03
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 302,466		311,933	-9,467
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			-9,467
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	2	-9,467
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?



Yes



No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017	1,378,548	11,946,005	0 115398
2016	1,003,252	1,675,892	0 598638
2015	1,064,753	1,148,105	0 927400
2014	3,410,759	1,740,785	1 959322
2013	3,806,596	1,809,917	2 103188

2 Total of line 1, column (d)	2	5 703946
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years	3	1 140789
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	12,348,946
5 Multiply line 4 by line 3	5	14,087,542
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	4,074
7 Add lines 5 and 6	7	14,091,616
8 Enter qualifying distributions from Part XII, line 4	8	1,703,376

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b	1	8,148
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2.	3	8,148
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	8,148
6	Credits/Payments		
a	2018 estimated tax payments and 2017 overpayment credited to 2018	6a	7,740
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	9,000
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	16,740
8	Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	8,592
11	Enter the amount of line 10 to be Credited to 2019 estimated tax ☐ 8,592 Refunded ☐	11	0

Part VII-A Statements Regarding Activities

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	Yes	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	1b		No
c	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ☐ \$ 0 (2) On foundation managers ☐ \$ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ☐ \$ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ☐ AZ, CA, FL, GA, HI, IL, MO, NC, NV, NY, OR, SC, TX, VA, WA, WI			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2018 or the taxable year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV	9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions.	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>WWW.GSFFFOUNDATION.ORG</u>	13	Yes	
14	The books are in care of ► <u>GOLDEN STATE FOODS CORP</u> Telephone no ► <u>(949) 247-8000</u>			

Located at ► 18301 VON KARMAN AVE SUITE 1100 IRVINE CA ZIP+4 ► 92612

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ► ☐			
	and enter the amount of tax-exempt interest received or accrued during the year ► 15			
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☒ No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). ☐ Yes ☒ No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions. ☐	1b		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018? ☐	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? ☐ Yes ☒ No			
	If "Yes," list the years ► 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions). ☐	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No			
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018). ☐	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

		Yes	No
5a During the year did the foundation pay or incur any amount to			
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☒ No		
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☒ No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☒ No		
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	☐ Yes ☒ No		
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☒ No		
b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.		5b	
Organizations relying on a current notice regarding disaster assistance check here.	▶ ☐		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	☐ Yes ☐ No		
If "Yes," attach the statement required by Regulations section 53.4945–5(d)			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☒ No	6b	No
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			
If "Yes" to 6b, file Form 8870			
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☒ No	7b	
b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?			
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	☐ Yes ☒ No		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.			▶	0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. ►		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ►	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	10,730,418
b	Average of monthly cash balances.	1b	1,806,583
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	12,537,001
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	12,537,001
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	188,055
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	12,348,946
6	Minimum investment return. Enter 5% of line 5.	6	617,447

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	617,447
2a	Tax on investment income for 2018 from Part VI, line 5.	2a	8,148
b	Income tax for 2018 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	8,148
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	609,299
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	609,299
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	609,299

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	1,703,376
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	1,703,376
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	1,703,376

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				609,299
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2018				
a From 2013.	3,716,112			
b From 2014.	3,323,733			
c From 2015.	1,007,359			
d From 2016.	919,477			
e From 2017.	788,519			
f Total of lines 3a through e.	9,755,200			
4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ <u>1,703,376</u>				
a Applied to 2017, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2018 distributable amount.				609,299
e Remaining amount distributed out of corpus	1,094,077			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	10,849,277			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions).	3,716,112			
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	7,133,165			
10 Analysis of line 9				
a Excess from 2014.	3,323,733			
b Excess from 2015.	1,007,359			
c Excess from 2016.	919,477			
d Excess from 2017.	788,519			
e Excess from 2018.	1,094,077			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. ▶					
b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)					
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
b 85% of line 2a					
c 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					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . .					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:	
a 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) (See section 507(d)(2)) MARK WETTERAU	
b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest	
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:	
Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.	
a The name, address, and telephone number or email address of the person to whom applications should be addressed	
b The form in which applications should be submitted and information and materials they should include	
c Any submission deadlines	
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors	

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	
b <i>Approved for future payment</i>				
Total			▶ 3b	

Enter gross amounts unless otherwise indicated

[illegible]

Part XVII

	Yes	No
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1a(1)	No
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1a(2)	No
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1b(1)	No
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1b(2)	No
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1b(3)		No
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1b(4)		No
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1b(5)		No
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1b(6)		No
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1c		No
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value
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[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations

described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here ***** _____ Signature of officer or trustee	2019-10-31 _____ Date	***** _____ Title
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May the IRS discuss this return with the preparer shown below

(see instr)? ☐ **Yes** ☐ **No**

Paid Preparer Use Only					
	Firm's name ▶				Firm's EIN ▶
	Firm's address ▶				Phone no

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(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
MARK WETTERAU	CHAIRMAN/CEO/DIRECTOR 5 00	0	0	0
18301 VON KARMAN AVENUE STE 1100 IRVINE, CA 92612				
LISA GOTTLIEB	CFO/DIRECTOR 2 00	0	0	0
18301 VON KARMAN AVENUE STE 1100 IRVINE, CA 92612				
TESS MCANENA	EXECUTIVE DIRECTOR 40 00	0	0	0
18301 VON KARMAN AVENUE STE 1100 IRVINE, CA 92612				
JOHN PAGE	SECRETARY/DIRECTOR 2 00	0	0	0
18301 VON KARMAN AVENUE STE 1100 IRVINE, CA 92612				
CAROL FAWCETT	DIRECTOR 1 00	0	0	0
18301 VON KARMAN AVENUE STE 1100 IRVINE, CA 92612				
BRIAN DICK	DIRECTOR 1 00	0	0	0
18301 VON KARMAN AVENUE STE 1100 IRVINE, CA 92612				
GREGG TARLTON	DIRECTOR 1 00	0	0	0
18301 VON KARMAN AVENUE STE 1100 IRVINE, CA 92612				
ALEX LUU	ASSISTANT SECRETARY 1 00	0	0	0
18301 VON KARMAN AVENUE STE 1100 IRVINE, CA 92612				
WAYNE MORGAN	DIRECTOR 1 00	0	0	0
18301 VON KARMAN AVENUE STE 1100 IRVINE, CA 92612				
JOHN MURPHY	DIRECTOR 1 00	0	0	0
18301 VON KARMAN AVENUE STE 1100 IRVINE, CA 92612				
LARRY MCGILL	DIRECTOR 1 00	0	0	0
18301 VON KARMAN AVENUE STE 1100 IRVINE, CA 92612				
RYAN HAMMER	DIRECTOR 1 00	0	0	0
18301 VON KARMAN AVENUE STE 1100 IRVINE, CA 92612				
PETE DELGIORNO	DIRECTOR 1 00	0	0	0
18301 VON KARMAN AVENUE STE 1100 IRVINE, CA 92612				
SHELLIE FREY	DIRECTOR 1 00	0	0	0
18301 VON KARMAN AVENUE STE 1100 IRVINE, CA 92612				
WILLIAM POCILUJKO	DIRECTOR 1 00	0	0	0
18301 VON KARMAN AVENUE STE 1100 IRVINE, CA 92612				

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(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
WILLIAM D SANDERSON 18301 VON KARMAN AVENUE STE 1100 IRVINE, CA 92612	DIRECTOR 1 00	0	0	0
STEPHEN WETTERAU 18301 VON KARMAN AVENUE STE 1100 IRVINE, CA 92612				
TED KOESTER 18301 VON KARMAN AVENUE STE 1100 IRVINE, CA 92612	DIRECTOR 1 00	0	0	0

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
A CHILD'S VOICE ADVOCACY CENTER 1132 USHER STREET ROOM 313 CONYERS, GA 30014		PC	GENERAL SUPPORT	36,000
ADOPT A FAMILY 180 EAST OCEAN BLVD SUITE 500 LONG BEACH, CA 90802		PC	GENERAL SUPPORT	500
ALL-AMERICAN BOYS CHORUS 1801 E EDINGER AVE STE 210 SANTA ANA, CA 92705		PC	GENERAL SUPPORT	570
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ANAHEIM DUCKS FOUNDATION 2101 E COAST HIGHWAY 3RD FLOOR CORONA DEL MAR, CA 92625		PC	GENERAL SUPPORT	10,000
ANGELS IN THE ATTICPO BOX 405 FLOYD, VA 24091		PC	GENERAL SUPPORT	5,629
AUBURN FOODBANK930 18TH PLACE NE AUBURN, WA 98002		PC	GENERAL SUPPORT	17,500
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BACK TO SCHOOL PROGRAM 18301 VON KARMAN AVE STE 1100 IRVINE, CA 92612		PC	GENERAL SUPPORT	512
BACKPACKS (VARIOUS SCHOOLS) 18301 VON KARMAN AVE STE 1100 IRVINE, CA 92612		PC	GENERAL SUPPORT	179,218
BEST FOOT FORWARD 9045 LA FONTANTA BLVD STE 108 BOCA RATON, FL 33434		PC	GENERAL SUPPORT	74,882
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BIG BROTHERS BIG SISTERS OF SOUTHWESTERN ILLINOIS 2726 FRANK SCOTT PARKWAY WEST BELLEVILLE, IL 62223		PC	GENERAL SUPPORT	7,750
BIG BROTHERS BIG SISTERS 310 E 2ND STREET NORTH WICHITA, KS 67202		PC	GENERAL SUPPORT	1,000
BLACKHURST ELEMENTARY - GRANTBOOK PROGRAM 2000 ELM STREET ST CHARLES, MO 63301		PC	GENERAL SUPPORT	5,013
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BOY SCOUTS OF AMERICA YELLOW RIVER DISTRICT 1800 CIRCLE 75 PARKWAY ATLANTA, GA 30339		PC	GENERAL SUPPORT	25,000
BOYS & GIRLS CLUB ADOPT-A-FAMILY 18301 VON KARMAN AVE STE 1100 IRVINE, CA 92612		PC	GENERAL SUPPORT	1,228
BOYS & GIRLS CLUB OF BUENA PARK 7758 KNOTT AVENUE BUENA PARK, CA 90620		PC	GENERAL SUPPORT	10,000
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BOYS & GIRLS CLUB OF METRO ATLANTA 100 EDGEWOOD AVE 700 ATLANTA, GA 30303		PC	GENERAL SUPPORT	20,000
BOYS & GIRLS CLUB OF W SAN GABRIEL VALLEY 328 S RAMONA AVE MONTEREY PARK, CA 91754		PC	GENERAL SUPPORT	7,500
BOYS & GIRLS CLUB OF WESTMINSTER 1440 CHESTNUT AVE WESTMINSTER, CA 92683		PC	GENERAL SUPPORT	7,681
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BOYS & GIRLS CLUBS OF METROPOLITAN PHOENIX 1330 N 15TH STREET PHOENIX, AZ 85006		PC	GENERAL SUPPORT	10,000
BOYS & GIRLS HAVEN 2301 GOLDSMITH LANE LOUISVILLE, KY 40218		PC	GENERAL SUPPORT	30,000
BUILD-A-BIKE (VARIOUS CHARITABLE ORGANIZATIONS) 18301 VON KARMAN AVE STE 1100 IRVINE, CA 92612		PC	GENERAL SUPPORT	50,040
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CAMP TWIN LAKES 1100 SPRING STREET SUITE 406 ATLANTA, GA 30309		PC	GENERAL SUPPORT	10,000
CANNING HUNGER INC 407 W IMPERIAL HWY H313 BREA, CA 92821		PC	GENERAL SUPPORT	7,500
CATERINA'S CLUB 341 E CENTER STREET ANAHEIM, CA 92805		PC	GENERAL SUPPORT	10,000
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CENTER FOR HIGHER AMBITION LEADERSHIP 55 OLD BEDFORD ROAD SUITE 104 LINCOLN, MA 01773		PC	GENERAL SUPPORT	25,000
CHAKOTA THERAPEUTIC RIDING CENTER 6248 WESCLIN ROAD GERMANTOWN, IL 62245		PC	GENERAL SUPPORT	6,500
CHILDREN'S HEALTHCARE OF ATLANTA 1687 TULLIE CIRCLE NE ATLANTA, GA 30329		PC	GENERAL SUPPORT	50,000
Total			▶ 3a	1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHILDREN'S HOPE ALLIANCE 156 FRAZIER LOOP STATESVILLE, NC 28677		PC	GENERAL SUPPORT	4,039
CHRISTMAS FAMILIES 18301 VON KARMAN AVE STE 1100 IRVINE, CA 92612		PC	GENERAL SUPPORT	1,715
CITRUS VALLEY HEALTH FOUNDATION 1115 S SUNSET AVENUE WEST COVINA, CA 91790		PC	GENERAL SUPPORT	7,250
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COMMUNITY OF HOPE MINISTRIES PO BOX 1004 GARNER, NC 27529		PC	GENERAL SUPPORT	54,965
CYSTIC FIBROSIS FOUNDATION 4929 WILSHIRE BLVD 760 LOS ANGELES, CA 90010		PC	GENERAL SUPPORT	5,000
DICKERSON CENTER FOR CHILDREN 140 GIBSON ROAD LEXINGTON, SC 29072		PC	GENERAL SUPPORT	7,464
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DREAM STREET FOUNDATION 324 S BEVERLY DRIVE SUITE 500 BEVERLY HILLS, CA 90212		PC	GENERAL SUPPORT	10,000
EDVENTURE CHILDREN'S MUSEUM 211 GERVAIS STREET COLUMBIA, SC 29201		PC	GENERAL SUPPORT	3,000
EMERGENCY FOOD NETWORK 3318 92ND STREET SOUTH LAKEWOOD, WA 98499		PC	GENERAL SUPPORT	10,000
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FAMILIES FORWARD8 THOMAS IRVINE, CA 92618		PC	GENERAL SUPPORT	7,000
FAMILY PROGRAMS HAWAI'I 801 SOUTH KING STREET HONOLULU, HI 96813		PC	GENERAL SUPPORT	1,198
FESTIVAL OF CHILDREN 3315 FAIRVIEW ROAD COSTA MESA, CA 92626		PC	GENERAL SUPPORT	5,000
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FRIENDS OF THE CHILDREN'S MUSEUM AT LA HABRA 310 S EUCLID STREET LA HABRA, CA 90631		PC	GENERAL SUPPORT	7,500
FRISTERS 17815 SKY PARK CIRCLE SUITE H IRVINE, CA 92614		PC	GENERAL SUPPORT	10,000
GOALS FOR LIFE 13100 STUDEBAKER ROAD NORWALK, CA 90650		PC	GENERAL SUPPORT	10,000
Total ► 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HARVEST HOPE FOOD BANKPO BOX 451 COLUMBIA, SC 29202		PC	GENERAL SUPPORT	20,982
HERITAGE HIGH SCHOOL 2400 GRANADE ROAD SW CONYERS, GA 30094		PC	GENERAL SUPPORT	717
JANESVILLE AREA SPECIAL OLYMPICS 2310 CROSSROADS DRIVE MADISON, WI 53718		PC	GENERAL SUPPORT	18,507
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
KANSAS FOOD BANK 1919 E DOUGLAS AVENUE WICHITA, KS 67211		PC	GENERAL SUPPORT	10,951
KATE'S CLUB 1190 W DRUID HILLS DRIVE NE T-80 ATLANTA, GA 30329		PC	GENERAL SUPPORT	10,000
LAURA'S HOUSE 999 CORPORATE DRIVE 225 LADERA RANCH, CA 92694		PC	GENERAL SUPPORT	7,500
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LEAP LEARNING CENTER 1221 WASS STREET TUSTIN, CA 92780		PC	GENERAL SUPPORT	5,000
LEVINE CHILDREN'S HOSPITAL 1000 BLYTHE BLVD CHARLOTTE, NC 28203		PC	GENERAL SUPPORT	922
LIFT UP AMERICA 27525 PUERTA REAL SUITE 100-421 MISSION VIEJO, CA 92691		PC	GENERAL SUPPORT	10,000
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LOVE OUR CHILDREN INC 2650 S MYRTLE AVENUE B3 MONROVIA, CA 91016		PC	GENERAL SUPPORT	10,000
MARYVALE REVITALIZATION CORP 3802 N 53RD AVENUE SUITE 350 PHOENIX, AZ 85031		PC	GENERAL SUPPORT	6,119
OLIVE CREST 2130 E 4TH STREET SUITE 200 SANTA ANA, CA 92705		PC	GENERAL SUPPORT	10,000
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PALMETTO HEALTH FOUNDATION 1600 MARION STREET COLUMBIA, SC 29201		PC	GENERAL SUPPORT	5,000
PARKWAY COMMUNITY SERVICES 7808 207TH STREET COURT EAST SPANAWAY, WA 98387		PC	GENERAL SUPPORT	10,000
PEDIATIC BRAIN TUMOR FOUNDATION 302 RIDGEFIELD COURT ASHEVILLE, NC 28806		PC	GENERAL SUPPORT	2,875
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PHOENIX CHILDREN'S HOSPITAL 1919 E THOMAS ROAD PHOENIX, AZ 85016		PC	GENERAL SUPPORT	25,000
PURE GAME1505 E 17TH STREET 211 SANTA ANA, CA 92705		PC	GENERAL SUPPORT	12,000
PUYALLUP FOOD BANK 110 23RD STREET SE PUYALLUP, WA 98372		PC	GENERAL SUPPORT	12,500
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RAD CAMP 18025 SKY PARK CIRCLE SUITE B IRVINE, CA 92614		PC	GENERAL SUPPORT	10,000
RELATIVES CRISIS CENTER 1100 EAST BLVD 460 CHARLOTTE, NC 28203		PC	GENERAL SUPPORT	2,405
RMHC - BOISE 101 E WARM SPRINGS AVENUE BOISE, ID 83712		PC	GENERAL SUPPORT	26,501
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RMHC ATLANTA 792 HOUSTON MILL ROAD ATLANTA, GA 30329		PC	GENERAL SUPPORT	52,460
RMHC AUGUSTAPO BOX 14189 AUGUSTA, GA 30919		PC	GENERAL SUPPORT	3,000
RMHC CENTRAL FLORIDA 13551 NEMOURS PARKWAY ORLANDO, FL 32827		PC	GENERAL SUPPORT	3,115
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RMHC CENTRAL OREGON 1700 NE PURCELL BLVD BEND, OR 97701		PC	GENERAL SUPPORT	16,358
RMHC CHAPEL HILL 101 OLD MISSION FARM ROAD CHAPEL HILL, NC 27514		PC	GENERAL SUPPORT	3,000
RMHC CHARLESTON 81 GADSDEN STREET CHARLESTON, SC 29401		PC	GENERAL SUPPORT	3,000
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RMHC CHARLOTTEPO BOX 35129 CHARLOTTE, NC 28235		PC	GENERAL SUPPORT	3,000
RMHC CHICAGOLAND AND NORTHWEST INDIANA 1301 W 22ND STREET 905 OAK BROOK, IL 60523		PC	GENERAL SUPPORT	76,287
RMHC COLUMBIA 1529 HAMPTON STREET SUITE 2001 COLUMBIA, SC 29201		PC	GENERAL SUPPORT	3,000
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RMHC DINNERS & EVENTS VARIOUS RMHC LOCATIONS IRVINE, CA 92612		PC	GENERAL SUPPORT	2,685
RMHC DURHAM 506 ALEXANDER AVENUE DURHAM, NC 27705		PC	GENERAL SUPPORT	3,000
RMHC HAWAII 1970 JUDD HILLSIDE ROAD HONOLULU, HI 96822		PC	GENERAL SUPPORT	1,113
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RMHC LAS VEGAS2323 POTOSI STREET LAS VEGAS, NV 89146		PC	GENERAL SUPPORT	7,500
RMHC NASHVILLE 2144 FAIRFAX AVENUE NASHVILLE, TN 37212		PC	GENERAL SUPPORT	6,000
RMHC NORFOLK404 COLLEY AVENUE NORFOLK, VA 23507		PC	GENERAL SUPPORT	3,000
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RMHC OF EASTERN NC529 MOYE BLVD GREENVILLE, NC 27834		PC	GENERAL SUPPORT	3,000
RMHC OF EASTERN WISCONSIN 8948 WATERTOWN PLANK ROAD MILWAUKEE, WI 53226		PC	GENERAL SUPPORT	10,000
RMHC OF THE CAROLINAS 706 GROVE ROAD GREENVILLE, SC 29605		PC	GENERAL SUPPORT	3,000
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RMHC OF THE COASTAL EMPIRE 4710 WATERS AVE SAVANNAH, GA 31404		PC	GENERAL SUPPORT	5,000
RMHC OREGON & SW WASHINGTON 2620 N COMMERCIAL AVENUE PORTLAND, OR 97227		PC	GENERAL SUPPORT	20,000
RMHC PASADENA 763 S PASADENA AVENUE PASADENA, CA 91105		PC	GENERAL SUPPORT	5,000
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RMHC PHOENIX 501 E ROANOKE AVENUE PHOENIX, AZ 85004		PC	GENERAL SUPPORT	25,141
RMHC RICHMOND 2330 MONUMENT AVENUE RICHMOND, VA 23220		PC	GENERAL SUPPORT	5,000
RMHC SAN DIEGO 2929 CHILDRENS WAY SAN DIEGO, CA 92123		PC	GENERAL SUPPORT	7,500
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RMHC SOUTHERN APPALACHIAN 418 N STATE OF FRANKLIN ROAD JOHNSON CITY, TN 37604		PC	GENERAL SUPPORT	3,000
RMHC SOUTHERN CALIFORNIA 765 S PASADENA AVENUE PASADENA, CA 91105		PC	GENERAL SUPPORT	20,000
RMHC SOUTHWEST FLORIDA 16100 ROSERUSH COURT FORT MYERS, FL 33908		PC	GENERAL SUPPORT	3,500
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RMHC SOUTHWEST VIRGINIA 2224 S JEFFERSON ST ROANOKE, VA 24014		PC	GENERAL SUPPORT	3,000
RMHC ST LOUIS 300 RONALD MCDONALD HOUSE LANE ST LOUIS, MO 63141		PC	GENERAL SUPPORT	25,291
RMHC TAMPA BAY28 COLUMBIA DRIVE TAMPA, FL 33606		PC	GENERAL SUPPORT	2,286
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RMHC TUCSON2155 E ALLEN ROAD TUCSON, AZ 85719		PC	GENERAL SUPPORT	20,000
RMHC WESTERN WASHINGTON & ALASKA 5130 40TH AVENUE NE SEATTLE, WA 98105		PC	GENERAL SUPPORT	4,072
RMHC WICHITA1110 N EMPORIA AVE WICHITA, KS 67214		PC	GENERAL SUPPORT	3,000
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
S2AY RURAL HEALTH NETWORK PO BOX 390 CANANDAIGUA, NY 14424		PC	GENERAL SUPPORT	7,200
SECOND HARVEST FOOD BANK OF METROLINA 500-B SPRATT STREET CHARLOTTE, NC 28206		PC	GENERAL SUPPORT	36,119
SEGERSTROM CENTER FOR THE ARTS 600 TOWN CENTER DRIVE COSTA MESA, CA 92626		PC	GENERAL SUPPORT	10,000
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SPARK OF LOVE1595 S GRAND AVENUE SAN PEDRO, CA 90731		PC	GENERAL SUPPORT	1,475
SPARROW'S NEST745 PRINCE AVENUE ATHENS, GA 30606		PC	GENERAL SUPPORT	7,500
STARS & STRIPES CHILDREN'S FOUNDATION PO BOX 7572 LAGUNA NIGUEL, CA 92607		PC	GENERAL SUPPORT	25,000
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE COOP FOUNDATION 162 N RAYMOND AVENUE FULLERTON, CA 92831		PC	GENERAL SUPPORT	22,592
THE LAUREL FOUNDATION 75 S GRAND AVENUE PASADENA, CA 91105		PC	GENERAL SUPPORT	7,000
THE LEON OWENS FOUNDATION 1105 S EUCLID STREET SUITE D-349 FULLERTON, CA 92832		PC	GENERAL SUPPORT	20,592
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE PAINTED TURTLE 1300 4TH STREET SUITE 300 SANTA MONICA, CA 90401		PC	GENERAL SUPPORT	15,000
TOYS FOR TOTS 18251 QUANTICO GATEWAY DR TRIANGLE, VA 22172		PC	GENERAL SUPPORT	494
VITAL LINK15401 RED HILL AVENUE TUSTIN, CA 92780		PC	GENERAL SUPPORT	5,000
Total ▶ 3a				1,495,670

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WASHINGTON ELEMENTARY 20 E STREET NE AUBURN, WA 98002		PC	GENERAL SUPPORT	500
WINTER COATS729 EXECTIVE DRIVE WHITEWATER, WI 53190		PC	GENERAL SUPPORT	11,861
WISHING WELL FOUNDATION 12716 PACIFIC AVENUE SOUTH TACOMA, WA 98444		PC	GENERAL SUPPORT	896
Total ▶ 3a				1,495,670

TY 2018 Investments - Other Schedule

Name: GSF FOUNDATION

EIN: 46-0501728

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
INVESTMENTS IN SECURITIES	FMV	9,812,550	9,812,550

TY 2018 Other Decreases Schedule

Name: GSF FOUNDATION

EIN: 46-0501728

Description	Amount
UNREALIZED MARK TO MARKET ADJUSTMENT - SECURITIES	934,767

TY 2018 Other Expenses Schedule**Name:** GSF FOUNDATION**EIN:** 46-0501728**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FUND RAISING EXPENSES	186,359	0	0	186,359
BANK CHARGES	14,253	0	0	14,253
ADMINISTRATIVE EXPENSES	7,915	0	0	5,201

TY 2018 Other Income Schedule**Name:** GSF FOUNDATION**EIN:** 46-0501728**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
RBC CAPITAL MARKETS, LLC	57,513	57,513	
RBC CAPITAL MARKETS, LLC	16,540	16,540	
RBC CAPITAL MARKETS, LLC	3,394	0	

TY 2018 Taxes Schedule**Name:** GSF FOUNDATION**EIN:** 46-0501728

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX ON INVESTMENT INCOME	15,000	0	0	0
CALIFORNIA LICENSE FEE	10	0	0	10
FOREIGN TAXES PAID	1,883	1,883	0	1,883

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93491304010209	
Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service		Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Go to www.irs.gov/Form990 for the latest information			OMB No 1545-0047
					2018
Name of the organization GSF FOUNDATION				Employer identification number 46-0501728	
Organization type (check one)					
Filers of: Form 990 or 990-EZ Form 990-PF					
Section: ☐ 501(c)() (enter number) organization ☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation ☐ 527 political organization ☒ 501(c)(3) exempt private foundation ☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation					
Check if your organization is covered by the General Rule or a Special Rule .					
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions					
General Rule					
☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions					
Special Rules					
☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ 3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II					
☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III					
☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions <i>exclusively</i> for religious, charitable, etc , purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc , purpose Don't complete any of the parts unless the General Rule applies to this organization because it received <i>nonexclusively</i> religious, charitable, etc , contributions totaling \$5,000 or more during the year ▶ \$					
Caution. An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)					
For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF					
Cat No 30613X					
Schedule B (Form 990, 990-EZ, or 990-PF) (2018)					

Name of organization GSF FOUNDATION	Employer identification number 46-0501728
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Part I **Contributors** (See Instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	See Additional Data Table	\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
—		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
—		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
—		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
—		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
—		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
—		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
—		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
—		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)

Employer identification number

46-0501728

Part II	Noncash Property
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(See instructions) Use duplicate copies of Part II if additional space is needed			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

Name of organization GSF FOUNDATION	Employer identification number 46-0501728
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Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____ Use duplicate copies of Part III if additional space is needed
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee

Additional Data

Software ID:
Software Version:
EIN: 46-0501728
Name: GSF FOUNDATION

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	ALCHEMY SYSTEMS	\$ 6,200	Person ☒
	5301 RIATA PARK COURT BUILDING F		Payroll ☐
	AUSTIN, TX 78727		Noncash ☐ (Complete Part II for noncash contributions)
<u>2</u>	ARCHER DANIELS MIDLAND	\$ 28,000	Person ☒
	2282 DAVIS COURT		Payroll ☐
	HAYWARD, CA 94545		Noncash ☐ (Complete Part II for noncash contributions)
<u>3</u>	BANKDIRECT CAPITAL FINANCE	\$ 5,000	Person ☒
	150 NORTH FIELD DRIVE STE 190		Payroll ☐
	LAKE FOREST, IL 60045		Noncash ☐ (Complete Part II for noncash contributions)
<u>4</u>	BARRY WEHMILLER DESIGN GROUP	\$ 8,000	Person ☒
	1075 WINDWARD RIDGE PARKWAY		Payroll ☐
	ALPHARETTA, GA 30005		Noncash ☐ (Complete Part II for noncash contributions)
<u>5</u>	BATORY FOODS	\$ 6,000	Person ☒
	9000 RIVERSIDE PARKWAY SUITE 300		Payroll ☐
	LITHIA SPRINGS, GA 30122		Noncash ☐ (Complete Part II for noncash contributions)
<u>6</u>	BEECO	\$ 5,000	Person ☒
	12360 E END AVENUE		Payroll ☐
	CHINO, CA 91710		Noncash ☐ (Complete Part II for noncash contributions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>7</u>	BEMIS COMPANY INC	\$ 33,000	Person ☒
	ONE NEENAH CENTER 4TH FLOOR		Payroll ☐
	NEENAH, WI 54957		Noncash ☐ (Complete Part II for noncash contributions)
<u>8</u>	CRAFTSMEN TRAILER	\$ 30,000	Person ☒
	3755 MUELLER ROAD		Payroll ☐
	ST CHARLES, MO 63301		Noncash ☐ (Complete Part II for noncash contributions)
<u>9</u>	DANIEL BRADHAM	\$ 5,450	Person ☒
	18301 VON KARMAN AVE STE 1100		Payroll ☐
	IRVINE, CA 92612		Noncash ☐ (Complete Part II for noncash contributions)
<u>10</u>	FRANK LISTI	\$ 5,000	Person ☒
	18301 VON KARMAN AVE STE 1100		Payroll ☐
	IRVINE, CA 92612		Noncash ☐ (Complete Part II for noncash contributions)
<u>11</u>	GATEWAY INDUSTRIAL POWER	\$ 25,000	Person ☒
	921 FOURNIE LANE		Payroll ☐
	COLLINSVILLE, IL 62234		Noncash ☐ (Complete Part II for noncash contributions)
<u>12</u>	JOHN PAGE	\$ 8,840	Person ☒
	18301 VON KARMAN AVE STE 1100		Payroll ☐
	IRVINE, CA 92612		Noncash ☐ (Complete Part II for noncash contributions)

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>13</u>	MABEK	\$ 5,000	Person ☒
	4445 DEER HAVEN COURT		Payroll ☐
	WESTLAKE VILLAGE, CA 91362		Noncash ☐
			(Complete Part II for noncash contributions)
<u>14</u>	MARK WETTERAU	\$ 25,500	Person ☒
	18301 VON KARMAN AVE STE 1100		Payroll ☐
	IRVINE, CA 92612		Noncash ☐
			(Complete Part II for noncash contributions)
<u>15</u>	MORNING STAR PACKING	\$ 28,800	Person ☒
	2211 OLD HIGHWAY 99 WEST		Payroll ☐
	WILLIAMS, CA 95987		Noncash ☐
			(Complete Part II for noncash contributions)
<u>16</u>	PRATT INDUSTRIES	\$ 11,000	Person ☒
	1800-B SARASOTA BUSINESS PARKWAY NE		Payroll ☐
	CONYERS, GA 30013		Noncash ☐
			(Complete Part II for noncash contributions)
<u>17</u>	RABOBANK INTERNATIONAL	\$ 5,000	Person ☒
	245 PARK AVENUE 36TH FLOOR		Payroll ☐
	NEW YORK, NY 10167		Noncash ☐
			(Complete Part II for noncash contributions)
<u>18</u>	RADO MECHANICAL GROUP	\$ 10,000	Person ☒
	341 GEES MILL BUSINESS PARKWAY NE		Payroll ☐
	CONYERS, GA 30013		Noncash ☐
			(Complete Part II for noncash contributions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>19</u>	ROADRUNNER TRANSPORTATION SERVICES	\$ 8,000	Person ☒
	4900 S PENNSYLVANIA AVE		Payroll ☐
	CUDAHY, WI 53110		Noncash ☐ (Complete Part II for noncash contributions)
<u>20</u>	ROBERT WOLPERT	\$ 7,700	Person ☒
	18301 VON KARMAN AVE STE 1100		Payroll ☐
	IRVINE, CA 92612		Noncash ☐ (Complete Part II for noncash contributions)
<u>21</u>	SIOUX HONEY ASSOCIATION	\$ 10,000	Person ☒
	301 LEWIS BLVD		Payroll ☐
	SIOUX CITY, IA 51102		Noncash ☐ (Complete Part II for noncash contributions)
<u>22</u>	SONOCO	\$ 6,700	Person ☒
	11610 COPENHAGEN COURT		Payroll ☐
	FRANKLIN PARK, IL 60131		Noncash ☐ (Complete Part II for noncash contributions)
<u>23</u>	STANDARD MAINTENANCE	\$ 8,000	Person ☒
	1898 VANDERHORN DRIVE		Payroll ☐
	MEMPHIS, TN 38134		Noncash ☐ (Complete Part II for noncash contributions)
<u>24</u>	SUN TRUST BANK	\$ 50,000	Person ☒
	303 PEACHTREE STREET NE 3RD FLOOR		Payroll ☐
	ATLANTA, GA 30308		Noncash ☐ (Complete Part II for noncash contributions)

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	WELLS FARGO BANK	\$ 10,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
	550 S 4TH STREET		
	MINNEAPOLIS, MN 55415		
26	WINPAK	\$ 7,100	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
	998 S SIERRA WAY		
	SAN BERNARDINO, CA 92408		