Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0047

Open to Public Inspection

Dep	artment of the	e Treasury Service Go to www.irs.gov/Form990		-	rmation.		Inspecti		
A		018 calendar year, or tax year beginning		nd ending			, 20		
В	Check if a	face in the second seco	odrich & Rosati Found	ation	DI	D Employer identification number			
	Address c						77-0276529		
	Name cha		red to street address)	Room/suite	E1	Telephon	e number		
	Initial retur	~ 				(650) 493-9300		
	Final return	- · · · · · · · · · · · · · · · · · · ·	foreign postal code						
	Amended				G	Gross rec	ceipts \$ 1	,330,041	
	Application	pending F Name and address of principal officer David S.	Steuer		H(a) Is this a group	return for su	ubordinates? Yes	✓ No	
		same as above		2	H(b) Are all subo	ordinates	ıncluded? 🔲 Yes	☐ No	
	Tax-exem	t status	ert no) 4947(a)(1) or	□ 527 /	If "No,"	attach a l	list (see instruction	ıs)	
J	Website:	N/A			H(c) Group exe	mption r	number >		
K	Form of org	anization 🗹 Corporation 🔲 Trust 🔲 Association 🔲 Other	▶ L Yea	r of formation	1990	M State o	of legal domicile	CA	
Р	art I	Summary							
	1	riefly describe the organization's mission or most						he	
92	Į p	urpose of other organizations which are organized a	nd operating within the	e meaning o	f section 501	(c) (3)			
nar		·							
Ver		heck this box ▶☐ If the organization discontinue		sposed of n	nore than 25		ts net assets.		
ဗိ	1	umber of voting members of the governing body				3		12	
જે જ	1	umber of independent voting members of the gov	• • •	-		4		12	
iţi		otal number of individuals employed in calendar y	ear 2018 (Part V, line	2a)		5		0	
Activities & Governance		otal number of volunteers (estimate if necessary)				6		17	
		otal unrelated business revenue from Part VIII, co				7a		0	
	b N	et unrelated business taxable income from Form	990-T, line 38	<u> </u>	D.:	7b	0	0	
		ontributions and grants (Part VIII, line 1h) REC	EIVED		Prior Year		Current Yea		
Revenue	8 0	ontributions and grants (Part VIII, line 1h)	SSI .		1,50	00,819	1	<u>,309,019</u>	
	9 F	rogram service revenue (Part VIII, line 29)	1:2019 1561.						
ě	10 li	rogram service revenue (Part VIII, line 3g) vestment income (Part VIII, column A) line (A), the revenue (Part VIII, column (A), line (A), the (A)	2nd 7d) 19 182	· ·		5,749		21,022	
_	, , ,	ther revenue (r art vill, column (A), intesto, ou, oc,	oc montaine i len.	·					
		otal revenue—add lines 8 through 11 must equal p		ne 12)		06,568		,330,041	
	1	rants and similar amounts paid (Part IX, column)		· ·	1,36	50,314	1	<u>,299,340</u>	
	1	enefits paid to or for members (Part IX, column (A							
es	1	alaries, other compensation, employee benefits (Par	• •	o-10)					
ë	1	rofessional fundraising fees (Part IX, column (A),		• •					
Expenses		otal fundraising expenses (Part IX, column (D), line				550		200	
		ther expenses (Part IX, column (A), lines 11a-11d otal expenses. Add lines 13-17 (must equal Part I		∵ ·	4.00	553		362	
	1	•		' ' ├─		0,867	<u>.</u>	299,702	
		evenue less expenses. Subtract line 18 from line	12	· · Beg	nning of Currer	15,701 nt Year	End of Yea	30,339 r	
ts o	20 T	otal assets (Part X, line 16)		3		64,033		194,372	
Asse	21 T	otal liabilities (Part X, line 26)		`` ├─	2,10	74,033	Σ,	134,372	
Net Assets or Fund Balances	22	et assets or fund balances. Subtract line 21 from	ine 20	· ·	2 16	64,033	2	,194,372	
	art II	Signature Block		<u> </u>	2,10	77,000		104,012	
		s of perjury, I declare that I have examined this return, including	accompanying schedules	and statemen	its, and to the b	est of m	v knowledge and l	pelief, it is	
		nd complete Declaration of preparer (other than officer) is base					,	,	
_	T	1112							
Sig	ın l	Signature of officer		, ,-	Date				
He		Ariela Tannenbaywar / Chief Fir	ancial Office:	r		5/14	4/19		
		Type or print name and title							
Pa		Print/Type preparer's name Preparer's sig	nature	Date		Check	7 if PTIN		
		 				self-empl			
	eparer se Only	Firm's name			Firm's E	IN ▶			
US	e Only	Firm's address ▶			Phone r				
Ма	y the IRS	discuss this return with the preparer shown above	e? (see instructions)	<u></u>	<u> </u>		Yes	□ No	
		k Reduction Act Notice, see the separate instruction		Cat No 1	1282Y		Form 9	90 (2018)	



_	0 (2018)				Page
Part		of Program Service			
1		iedule O contains a re e organization's missic	esponse or note to any line in this F	Part III	<u> L</u>
•	-	-	to make gifts to other section 501 (c)(3) organizations which engage in activ	ities which
			ty (b) further the professional and edu		
		ole, educational and or o			
2	Did the organization	on undertake anv signi	ficant program services during the y	ear which were not listed on the	
_			· · · · · · · · · · · · · · · · · · ·		Yes 🗹 No
	If "Yes," describe t	these new services on	Schedule O.	_	
3			, or make significant changes in		_
	services?				Yes ☑ No
4		these changes on Schoolston's program ser	equie O. vice accomplishments for each of its	e three largest program seniices a	s massurad h
•	expenses. Section	501(c)(3) and 501(c)(4	b) organizations are required to report each program service reported.		
4a			,299,340 including grants of \$ nrough grants awarded to two hundred		
		· /=		\(\frac{1}{2} \cdot \cdo	
4b	(Code:	(Expenses \$	including grants of \$) (Hevenue \$)
4c	(Code:	(Expenses \$	including grants of \$) (Revenue \$)
4d		vices (Describe in Sch		.	
	(Expenses \$	ıncludıng gr	ants of \$) (Revenue	· Þ)	

1,299,340

4e Total program service expenses ▶



Part IV **Checklist of Required Schedules**

			Tes	MÔ
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	7	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<i>'</i>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	:	1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		√
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		✓
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII </i>	11c		✓
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		✓
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		✓
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		✓
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		✓
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
•	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		✓
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17		✓
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		✓
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		✓
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b]	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	1	
		E	. 000	(2010)

Form **990** (2018)

Part	IV Checklist of Required Schedules (continued)			
,			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III.	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		✓
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
c 29	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c 29		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		√
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38		1
Part				
	Check if Schedule O contains a response or note to any line in this Part V		· · ·	<u> </u>
4	Enter the number reported in Roy 3 of Form 1006. Enter -0- if not applicable		Yes	No
1a b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
•			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	}		
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
þ	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		1
b	If "Yes," enter the name of the foreign country: ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5 0		5a		√
5a b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		▼
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		_
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	 30		
Va	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or	<u> </u>		Ť
•	gifts were not tax deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		\
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		\
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		✓
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8		
9	sponsoring organization have excess business holdings at any time during the year?	P		
э a	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter.	55		
. а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources		- 1	
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
_	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
_	the organization is licensed to issue qualified health plans			
с 14а	Enter the amount of reserves on hand	14a		√
ı4a b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i> .	14a		<u> </u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	. 70	$\overline{}$	
	excess parachute payment(s) during the year?	15		1
	If "Yes," see instructions and file Form 4720, Schedule N.			Ť
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		1
	If "Yes," complete Form 4720, Schedule O.			

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response or note to any line in this Part VI	See ins	struct	ions.
Secti	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 12	4		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 12			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	2	<u>√</u>	
3	Did the organization delegate control over management duties customarily performed by or under the direct		•	
4	supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	3		\ <u>\</u>
4 5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		
6	Did the organization have members or stockholders?	6	1	<u> </u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	1	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,		•	
ь	stockholders, or persons other than the governing body?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	1	
b	Each committee with authority to act on behalf of the governing body?	8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓	Ļ.,
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			<u> </u>
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	√	├──
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓	├─
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	10-	,	
40	describe in Schedule O how this was done	12c	<u>/</u>	
13 14	Did the organization have a written whistleblower policy?	14	V	
15	Did the process for determining compensation of the following persons include a review and approval by		*	1
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15-		
a	The organization's CEO, Executive Director, or top management official	15a 15b		
b	Other officers or key employees of the organization			1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		✓
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	10:		igsqcut
<u> </u>	organization's exempt status with respect to such arrangements?	16b		L
	on C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► California			
17	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-	 (Sec	tion f	501(0)
18	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int financial statements available to the public during the tax year.			y, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords	>	

Form	990	(201	8)

Form **990** (2018)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☑ Check this box if neither the organization not	or any relate	d org	anız	atic	n c	ompe	ensa	ted any curren	nt officer, directo	r, or trustee.
(A) Name and Title	(B) Average			Pos neck		than o		(D) Reportable	(E) Reportable	(F) Estimated
	hours per week (list any hours for related organizations below dotted line)	office or directo				Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) David S. Steuer Chairman	part time	/		 				0	0	0
(2) Suzanne Bell Secretary (1/1/18-4/5/18)	part time	1		✓				0		0
(3) David Berger Secretary (6/7/18-12/31/18)	part time	1		1				o	0	0
(4) David Thomas Treasurer	part time	1		1				0	0	0
(5) Jonathan Fayman Chief Financial Officer (1/1/18-9/6/18)	part time			✓				0	0	0
(6) Ariela Tannenbaum Chief Financial Officer (10/15/18-12/31/18)	part time			1				0	0	0
(7) Colleen Ball Director	part time	1		1				0	0	0
(8) Mark Fitzgerald Director	part time	1		✓				o	0	0
(9) Katharine Martin Director	part time	1		✓				0	0	0
(10) Catherine Moreno Director (6/28/18-12/31/18)	part time	✓		✓				0	/o	<u> </u>
(11) Vern Norviel Director	part time	1		✓				0	0	0
(12) Bob O'Conner Director (6/28/18-12/31/18)	part time	1		1				o	0	0
(13) Chul Pak Director	part time	\		✓				0	0	0
(14) Robert Suffoletta Director	part time	√		1				0	0	0

ı aı	Section A. Officers, Directors, Trust	lees, Ney E	mpio	yees		na r C)	ngne	St C	ompensated E	:mpioyees (contil	nuea)	
	(A) Name and title	(B) Average hours per	box,	unles	Pos neck ss pe	ition more	e than out the thick the t	an	(D) Reportable compensation	(E) Reportab compensation	n from		
		week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizatio (W-2/1099-N	ons	other compensation from the organization and related organizations	
	Gregory Watts	part time	1		1								_
	Director Gail McFall	part time	<u>*</u>						0		0		0
(17)	Vice-President and Foundation Administrato				✓				0		0		0
(18)						L	ļ	ļ					_
(19)											İ		
(20)													
(21)													_
(22)													
(23)													_
(24)													_
(25)				Щ					<u> </u>				
													_
1b c d	Sub-total	VII, Sectio						^ ^	0 0		0 0		0
2	Total number of individuals (including but reportable compensation from the organization)	not limited						e) w	ho received mo	ore than \$1	00,00	0 of	
3	Did the organization list any former off employee on line 1a? If "Yes," complete S						-	mp	loyee, or high	est compe	nsate	Yes No	,
4	For any individual listed on line 1a, is the organization and related organizations individual												
5	Did any person listed on line 1a receive of for services rendered to the organization?									ation or ind		al 5	
Section	on B. Independent Contractors												_
1	Complete this table for your five highest of compensation from the organization. Rep year.	•		•									
	(A) Name and business addr	ess							(B) Description of se	ervices		(C) Compensation	
													_
													_
	Total number of independent contracts	re (includes	ıa hı	t na	at J	ım ıt.	ad to	th	nee listed sha	wa) who			_ =
2	Total number of independent contractor received more than \$100,000 of compensations.								ose nsieu dul	ACT ANITO			

Par	VIII					
		Check if Schedule O contains a response or note to	any line in this (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c	Federated campaigns 1a Membership dues 1b Fundraising events 1c Related organizations 1d				
ributions, G Other Simila	e f	Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above 16 1,309,019				
a at	g	Noncash contributions included in lines 1a–1f. \$				
	h	Total. Add lines 1a–1f ▶	1,309,019			
Program Service Revenue	2a b	Business Code				
n Servic	d					
Prograr	e f g	All other program service revenue . Total. Add lines 2a–2f				
	3	Investment income (including dividends, interest, and other similar amounts) ▶ Income from investment of tax-exempt bond proceeds ▶	21,022			
	5	Royaltres				
	6a b c	Gross rents Less: rental expenses Rental income or (loss)				
	d	Net rental income or (loss) ▶				
	7a	Gross amount from sales of assets other than inventory				
	b	Less: cost or other basis and sales expenses .				
	d	Gain or (loss)				
anue	8a	Gross income from fundraising				
Other Reve		events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a				
돛	ь	Less: direct expenses b				
		Net income or (loss) from fundraising events . Gross income from gaming activities. See Part IV, line 19				
	b	Less: direct expenses b	l			
	С	Net income or (loss) from gaming activities ▶				
		Gross sales of inventory, less returns and allowances a				
		Less: cost of goods sold b				
	С	Net income or (loss) from sales of inventory >				
		Miscellaneous Revenue Business Code				
	11a					
	b					
	С			-		
	d	All other revenue	_			
	e	Total revenue See instructions	1 220 041			ļ
	12	LOTAL FOMOBILA SAA INSTRUCTIONS	4 000 044			1

So, 9st, with 100 of Part VIV. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and few prophyces Compensation included above, to disqualified persons (see defined under section 4958(i)(3)(8) Person plan accruals and contributions (include section 4914) (and 406)(by imphyer contributions) Other employee benefits Payroll taxes Peas for services (non-employees): a Management Legal C Accounting d Lobbying Professional fundrasing services. See Part IV, line 17 Investment management fees Other, (lithin 11g smount exceeds 10% of fine 25, column (M) amount, list fire 11g sepsies on Schedule O) Advertising and promotion Office expenses 181 181 Information technology Royamets to affiliates Conceptancy Travel Payments of ravel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings interest Interest Payments or affiliates Conferences, conventions, and mortization Interest Payments or affiliates Depreciation, depletion, and amortization Interest Payments or affiliates Interest Payments or affiliates Interest Payments or affiliates Interest Interest		00 (2018)				Page 10
Check if Schedule O contains a response or note to any line in this Part IX. Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 22. Grants and other assistance to domestic middents. See Part IV, line 22. Grants and other assistance to foreign individuals. See Part IV, line 22. Grants and other assistance to foreign grants. See Part IV, line 22. Grants and other assistance to foreign grants. See Part IV, line 23. Grants and other assistance to foreign grants. See Part IV, line 24. Benefits paid to or for membrars. Compensation of current officers, directors, trustees, and key employees. Compensation of current officers, directors, trustees, and key employees. Compensation of current officers, directors, trustees, and key employees. Compensation of section 4958(c)(30). Other salense and wages. Person glan accurates and contributions (include section 401(k) and 403(b) employer contributions). Other employee benefits. 10 Payroll taxes. 11 Fees for services (non-employees): a Management b Legal C Accounting d Lobbyma. D Lobert in 11g amount acceded 10% of the 25, column (A) amount, site the 11g expense on Schedule O). 12 Advertising and promotion Office accesses. 13 Travel 14 Information technology 15 Royalties 16 Compenses, conventions, and meetings interest. 17 Travel 18 Payments of fravel or entertainment expenses for any federal, state, or local public officials of the properties of			nolete all columns. Al	ll other organization	s must complete co	olumn (A)
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. 1 Grants and other assistance to demestic organizations and domestic governments. See Part IV, line 12 2 Grants and other assistance to domestic individuals. See Part IV, line 12 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 12 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation of current officers, directors, trustees, and key employees 7 Other salaries and wages 8 Penson plan accruals and confluctions (include section 401k) and 403b employer contributions) 9 Other employee benefits 1) Payroll taxes 1) Pees for services (non-employees): a Management b Legal c Accounting d Lobbying e Professorial fundraising services. See Part IV, line 17 f Investment management fees g Other, (if her 11) amount acceeds 10% of line 25, column (N) amount, line 11) genome acceleration of the control of the	360110			<u>-</u>		
and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16. 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(3)(8) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(f)) and 402(f) employer contributions) 9 Other employee benefits. 10 Payroll taxes. 11 Fees for services (non-employees): a Management b Legal c Accounting d Lobbying Other, lift in 19 payroll taxes. 10 Professional fundrasing services. See Part IV, line 17 flinvestment management fees 10 Other, illing amount exceeds 01(6) of line 25, column (A) amount, list line 19 apeniesses of Section 19 (A) amount, list line 19 apeniesses of Section 19 (A) amount, list line 19 apeniesses on Schedule O) 13 Office expenses 16 Occupancy 17 Travel 19 Payments to travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10 Interest included above (List miscellaneous expenses in covered above (List miscellaneous expenses in covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 19 expenses and covered above (List miscellaneous expenses not cov		t include amounts reported on lines 6b, 7b,	(A)	(B) Program service	(C) Management and	(D) Fundraising
mdividuals. See Part IV, Ine 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, Ines 15 and 16. Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation included above, to disqualified persons (as defined under section 4958(i)(3)(B) Other salanes and wages Penson plan accruals and contributions (include section 401(i)) and 403(i) employer contributions) Other salanes and wages Other parily employee benefits Payroll taxes Payroll taxes Accounting d Lobbying C Accounting d Lobbying Other, and indrasing services. See Part IV, line 17 f Investment management fees Other, illine lig amount exceeds 10% of line 25, column (A) amount, list line 11g apoint exceeds 10% of line 25, column (A) amount, list line 11g apoint exceeds 10% of line 25, column (A) amount, list line 11g apoint exceeds 10% of line 25, column (A) amount, list line 11g apoint exceeds 10% of line 25, column (A) amount, list line 11g apoint exceeds 10% of line 25, column (A) amount, list line 11g apoint exceeds 10% of line 25, column (A) amount, list line 11g apoint exceeds 10% of line 25, column (A) amount, list line 11g apoint exceeds 10% of line 25, column (A) amount, list line 12g expenses on Schedule O) Insurance Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 25e expenses on Schedule O, a Filting Fee Jaling	1		1,299,340	1,299,340		
organzations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16. Benefits paid to or for members	2			•		
5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(0)(8) and persons described in section 4958(0)(8) and displayment of the residence	3	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
persons (as defined under section 4958(h(1)) and persons described in section 4958(h(3)(B)		Compensation of current officers, directors,				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits	6	persons (as defined under section 4958(f)(1)) and				
10 Payroll taxes		Pension plan accruals and contributions (include				
a Management b Legal		, ,				
a Management b Legal c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other, (if line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) Advertising and promotion 12 Advertising and promotion 13 Office expenses		•				
b Legal c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees G Other, if line 11g arount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0) Advertising and promotion 12 Advertising and promotion 3 Office expenses 181 181 181 181 181 181 181 181 181 18		· · · · · · · · · · · · · · · · · · ·				
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d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 2 Advertising and promotion 3 Office expenses 181 181 181 181 181 181 181 181 181 18						
f Investment management fees g Other, (if line 11 g amount exceeds 10% of line 25, column (A) amount, list line 11 g expenses on Schedule O)	d	_				
g Other (if line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 12 Advertising and promotion	е	Professional fundraising services. See Part IV, line 17				
(A) amount, list line 11g expenses on Schedule O) Advertising and promotion						
13 Office expenses	g	(A) amount, list line 11g expenses on Schedule O)				
14 Information technology 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10 Interest 11 Payments to affiliates 12 Depreciation, depletion, and amortization 13 Insurance 14 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 15 Registration Fee 150 150 150 150 150 150 150 150 150 150		- · ·				
15 Royalties		· · · · · · · · · · · · · · · · · · ·	181		181	
16 Occupancy						
Travel	-		+			
Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Interest Depreciation, depletion, and amortization Insurance Cother expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) Filting Fee Registration Fee All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here Insurance Insurance Insurance Insuranc						
20 Interest		Payments of travel or entertainment expenses				
21 Payments to affiliates	19	Conferences, conventions, and meetings .				
Depreciation, depletion, and amortization Insurance Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) Filing Fee Registration Fee 150 150 C d e' All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here inf	20	Interest				
23	21	Payments to affiliates				····
Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) a Filing Fee 31 31 31 b Registration Fee 150 150 c 4 e' All other expenses Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if		· · · · · · · · · · · · · · · · · · ·				
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(A) amount, list line 24e expenses on Schedule O.) a Filing Fee 31 31 31 b Registration Fee 150 150 c 4 e' All other expenses Add lines 1 through 24e 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if						
a Filing Fee 31 31 31 b Registration Fee 150 150 c d e' All other expenses 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if						
b Registration Fee 150 150 c d	а	FILL FOR	31		31	· · · · · · · · · · · · · · · · · · ·
c d e ' All other expenses 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if	b		150		150	
d e ' All other expenses 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if	C					
Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if	ď					
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if	_				-	
organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if						
	26	organization reported in column (B) joint costs from a combined educational campaign and				
following SOP 98-2 (ASC 958-720) 1,299,702 1,299,340 362		fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)	1,299,702	1,299,340	362	

	Check if Schedule O contains a response or note to any line in this Par			
		/A\		
		(A) Beginning of year		(B) End of year
	Cash—non-interest-bearing	7,126	1	3,120
	Savings and temporary cash investments	2,156,907	2	2,191,252
	Pledges and grants receivable, net		3	
	Accounts receivable, net		4	
	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees.			
	Complete Part II of Schedule L		5	
	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			
ë	- · · · · · · · · · · · · · · · · · · ·		6	
9	Notes and loans receivable, net		7	
` '	Inventories for sale or use		9	
- 1	Prepaid expenses and deferred charges		9	
'	other basis. Complete Part VI of Schedule D			
	b Less: accumulated depreciation 10b		10c	
1	Investments—publicly traded securities		11	
1:	Investments—other securities. See Part IV, line 11		12	
1:	Investments-program-related. See Part IV, line 11		13	
14	Intangible assets		14	
1:	Other assets. See Part IV, line 11		15	
1	Total assets. Add lines 1 through 15 (must equal line 34)	2,164,033	16	2,194,372
1	Accounts payable and accrued expenses		17	
18			18	
19	Deferred revenue		19	
2			20	
2	· ' '		21	
<u>e</u> 2				
=	trustees, key employees, highest compensated employees, and			
Liabilities	disqualified persons. Complete Part II of Schedule L		22	
-	· · · · · · · · · · · · · · · · · · ·		23	
2	· · · · · ·		24	
2:	parties, and other liabilities not included on lines 17-24). Complete Part X			
	of Schedule D		25	
2	Total liabilities. Add lines 17 through 25		26	
Ses	complete lines 27 through 29, and lines 33 and 34.			
E 2	Unrestricted net assets		27	
<u>E</u> 2	Temporarily restricted net assets		28	
일 2			29	
Net Assets or Fund Balances G G G G G G G G G G G G G G G G G G G	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
ध्र । उ	Capital stock or trust principal, or current funds	2,164,033	30	2,194,372
တ္တိ ဒ	Paid-in or capital surplus, or land, building, or equipment fund		31	
₹ 3	<u> </u>		32	
	-	2,164,033		2,194,372
3	Total liabilities and net assets/fund balances	2.164.033	34	2.194.372 Form 990 (2018)

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Page	4

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					ige 12
Par	t XI Reconciliation of Net Assets				
`	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>	<u>.</u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,33	<u> 30,041</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,29	9,702
3	Revenue less expenses. Subtract line 2 from line 1	3		3	30,339
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		2,16	54,03 <u>3</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		2,19	4,372
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	· · ·	<u></u>		
				Yes	No
1	Accounting method used to prepare the Form 990: 🗹 Cash 🔲 Accrual 🔲 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plaın in			
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		✓_
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled or			
	reviewed on a separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		✓_
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on a			
	separate basis, consolidated basis, or both:		l l		
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o				
	of the audit, review, or compilation of its financial statements and selection of an independent according		2c		
	If the organization changed either its oversight process or selection process during the tax year, ex	cplain in			
	Schedule O.		<u> </u>		
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in			
	the Single Audit Act and OMB Circular A-133?		3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b	l	

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt chantable trust.

► Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

Name of the organization **Employer identification number** The Wilson Sonsini Goodrich & Rosati Foundation 77-0276529 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV. Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV. Sections A and D. and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported organization (ii) FIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of listed in your governing other support (see (described on lines 1-10 support (see document? above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D) (E)

Total

Schedu	ile A (Form 990 or 990-EZ) 2018						Page 2
Part	Support Schedule for Organiza (Complete only if you checked the Part III. If the organization fails to	ie box on line	5, 7, or 8 of	Part I or if the	organization	failed to qua	
Sect	on A. Public Support						
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,333,333	1,100,000	1,200,000	1,500,819	1,309,019	6,443,171
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	1,333,333	1,100,000	1,200,000	1,500,819	1,309,019	6,443,171
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shows on line 11 column (f)						
^	shown on line 11, column (f)						31,686
6 Sacti	Public support. Subtract line 5 from line 4 on B. Total Support						6,411,485
	idar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	1,333,333	1,100,000	1,200,000	1,500,819	1,309,019	6,443,171
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1,524	2,477	2,582	5,749	21,022	33,354
9	Net income from unrelated business activities, whether or not the business is regularly carried on	1,324	2,411	2,302	3,143	21,022	33,334
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10	<u></u>					6,476,525
12	Gross receipts from related activities, etc.					12	F01(-)(0)
13	First five years. If the Form 990 is for the organization, check this box and stop her	-				ear as a section	. > 🗆
Secti	on C. Computation of Public Suppor				·-		
14	Public support percentage for 2018 (line 6				r	14	99.00 %
15 16a	Public support percentage from 2017 Sch 331/3% support test—2018. If the organic box and stop here. The organization qual	zation did not d	check the box	on line 13, and	d line 14 is 33		
b	331/3% support test—2017. If the organization this box and stop here. The organization	zation did not o qualifies as a p	check a box or ublicly suppor	n line 13 or 16a ted organization	a, and line 15 i	s 33 ¹ /3% or mo	re, check ▶ □
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part VI how the organization meets the "	ets the "facts-	and-circumsta	nces" test, che	eck this box a	nd stop here. I	Explain in

b 10%-facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Part	III Support Schedule for Organiza	ations Descr	ibed in Sect	on 509(a)(2)			
•	(Complete only if you checked to						ider Part II.
	If the organization fails to qualify	under the te	sts listed belo	ow, please co	omplete Part	II.)	
	on A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513			-			
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .	_					
b	·Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
8	Add lines 7a and 7b						
	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2014	″ (b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the organization, check this box and stop he	_				ear as a section	
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2018 (line 8			3, column (f))		15	%
16	Public support percentage from 2017 Sch				<u> </u>	16	%
	on D. Computation of Investment In		_			- 	
17	Investment/income percentage for 2018 (• •	-		17	<u>%</u>
18 19a	Investment income percentage from 2017 331/3%, support tests – 2018. If the organ 17 is not more than 331/3%, check this box	zation did not	check the box	on line 14, ar	nd line 15 is m		
b	331/3% support tests – 2017. If the organiz line 18 is not more than 331/3%, check this b						
20	Private foundation. If the organization di		_			· ·	_

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Secti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b	_	
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5а	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	 9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

Part	Supporting Organizations (continued)			
•			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		<u> </u>
	A family member of a person described in (a) above?	11b		
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		<u> </u>
Secu	on B. Type I Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	$\overline{}$	163	140
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			1
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
<u>Section</u>	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Socti	on D. All Type III Supporting Organizations			Ь
Secui	on b. All Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			<u> </u>
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		L
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.			
Cooti	on E. Type III Functionally Integrated Supporting Organizations	3		<u> </u>
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	netru	ctions	<u></u>
' a	The organization satisfied the Activities Test. Complete line 2 below.	736761		3).
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (s	see in:	struct	ions).
2	Activities Test. Answer (a) and (b) below.		Yes	F
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		ļ
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
_	•	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
h.	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
b	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functional Part V Type III Non-Function Part V Type III Non	jan	izations	
1 ` Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organization.			
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C—Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionall instructions).	y int	egrated Type III supporti	ng organization (see

Part	Type III Non-Functionally Integrated 509(a)(3	Supporting Organi	izations (continued)	
Sect	on D—Distributions			Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	orted	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic (provide details in Part VI). See instructions.	h the organization is res	sponsive	
9	Distributable amount for 2018 from Section C, line 6		 	
10	Line 8 amount divided by line 9 amount			,,
	Ellio o amount divided by line o amount		(ii)	(iii)
Secti	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2018	Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018			
	(reasonable cause required—explain in Part VI). See			
	Instructions.			
3	Excess distributions carryover, if any, to 2018			
	From 2013			
<u>b</u>	From 2014			
c d	From 2016			
e e	1 0017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years	· ·		
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)	-: ·		
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from			
•	Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
С	Remainder, Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2014			
b	Excess from 2015			
С	Excess from 2016			
<u>d</u>	Excess from 2017			
е	Excess from 2018			

D	¢
Page	c

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
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SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

▲ Go to www.irs.gov/Form990 for the latest information.

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OMB No 1545-0047

Inspection

Schedule I (Form 990) (2018) Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, **%**□ (h) Purpose of grant or assistance Employer identification number 99 ✓ Yes 77-0276529 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and noncash assistance (g) Description of Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. . . (f) Method of valuation (book, FMV, appraisal, other) Cat No 50055P Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of noncash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (d) Amount of cash grant Enter total number of other organizations listed in the line 1 table (c) IRC section (if applicable) the selection criteria used to award the grants or assistance? For Paperwork Reduction Act Notice, see the Instructions for Form 990. General Information on Grants and Assistance (P) EIN The Wilson Sonsini Goodrich & Rosati Foundation (1) See Attachment 1 (a) Name and address of organization or government Name of the organization Part II Part I 2 9 8 8 € 9 (12) 6 ල

Schedule I (Ft	Schedule I (Form 990) (2018)					Page 2
Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.	nestic Individua space is needed.	ils. Complete if the	organization answ	ered "Yes" on Form 990,	
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
-						
8						
ო						
4						
5						
9						
7						
Part IV The primar	Part IV Supplemental Information. Provide the inform The primary recipients of funding from The Wilson Sonsini Goodrich		equired in Part I, lin i Foumdation are non-	e 2; Part III, columr profit legal services o	ation required in Part I, line 2; Part III, column (b); and any other additional information. Resati Foumdation are non-profit legal services organizations that have received funding for sever	ation required in Part I, line 2; Part III, column (b); and any other additional information. Rosati Foundation are non-profit legal services organizations that have received funding for several years and with
whom we h	whom we have a continuing relationship. Accordingly, the Foundation continually monitors the status of grants to our largest grantees.	e Foundation contir	nually monitors the sta	itus of grants to our la	rgest grantees.	
The other r	The other recipients of funding from The Wilson Sonsini Goodrich &		oundation are typicall	y smaller grants to the	non-profit organizations for	Rosati Foundation are typically smaller grants to the non-profit organizations for general operating support that are
not multi-year grants.	ear grants.					
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						Schedule I (Form 990) (2018)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No 1545-0047 2018

Open to Public Inspection

Employer identification number

77-0276529

Department of the Treasury Internal Revenue Service Name of the organization

The Wilson Sonsini Goodrich & Rosati Foundation

► Attach to Form 990 or 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information.

Part VI 2 Each of the trustees and officers of the Foundation has a business relationship with the other trustees and officers. Each officer is an employee of Wilson Sonsini Goodrich & Rosati, P. C., a professional corporation engaged in the practice of law ("WSGR"). Each of the trustees is also a shareholder (holding less than one percent of the outstanding shares of WSGR). All trustees and officers serve in their individual capacities (not as a representative of WSGR). 6 & 7 The organization has one class of members: the shareholders of Wilson Sonsini Goodrich & Rosati, PC 11b The Form 990 was reviewed by all members of the Board of Directors. 12c The members of the Board of Directors of the Foundation disclose annually. 19 The Foundation's governing documents, conflict of interest policy, and financial statements are available upon request.