2949127

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation
Do not enter social security numbers on this form as it may be made public.

02618 OMB No 1545-0052 2018

enter social security numbers on this form as it may be made public.	
www.irs.gov/Form990PF for instructions and the latest information.	Open to Public Inspection
10/05	10/01 1

) Denarii	nent of the Treasury			ecurity numbers of				<u></u>
<u>)</u>	ntemal	Revenue Service	. Go to ww	w.irs.gov/F	orm990PF for insti				Open to Public Inspection
	or ca	alendar year 2018	or tax year beginn	ing	1	0/25, 2018	, and endi	ing	12/31, 20 18
ر ن		of foundation						1	dentification number
<u> </u>	THE	SAISEI FOUN	NDATION					83-25	99773
1	Numb <u>e</u>	r and street (or P O bo	ox number if mail is not del	ivered to stree	et address)		Room/suite	e B Telephon	e number (see instructions)
	311	.2 WINDSOR RI	D. #508					(650) 279-3540
Č	City or 1	town, state or province	, country, and ZIP or foreig	n postal code)				
								C If exempted pending, cl	on application is heck here.
	AUS	TIN, TX 7870	03						
(G Che	eck all that apply:	X Initial return		Initial return	of a former p	oublic char	rity D 1 Foreign	organizations, check here >
			Final return		Amended re	turn		2 Foreign	organizations meeting the
			Address cha	nge	Name chang	е			t, check here and attach
1	<u> C</u> he	eck type of organi	zatıon [.] X Sectior	1 501(c <u>)(3)</u>	exempt private	foundation	VO	E if newate f	oundation status was terminated
		Section 4947(a)(1) r	nonexempt chantable to	rust	Other taxable pr	ivate founda		1 - " pa.c.	tion 507(b)(1)(A), check here .
1	Faii	r market value o	of all assets at 📙	Accountin	ig method: X C	ash 💹 Acc	crual	F If the foun	dation is in a 60-month termination
		l of year (from Pa		Other	(specify)			under sect	ion 507(b)(1)(B), check here . 🕨 🔃
					nn (d) must be on ca	ash basis)			
	Part	Analysis of Rev	venue and Expenses	s (The	a) Revenue and	(b) Not inv	ootmont	(a) Adjusted	(d) Disbursements net for charitable
1			in columns (b), (c), and rily equal the amounts i	(a) '	expenses per books	(b) Net inve		(c) Adjusted income	purposes
么		column (a) (see in				ļ			(cash basis only)
• • •	1	.£ 4b.	ts, etc., received (attach sched	ule) .	2,000,000	-		EINE!	1
	2	Check ▶ if the	e foundation is not require ch Sch B			1	RE	7.1	X
	3		nd temporary cash investm						<i>y</i> >!
	4	Dividends and inte	erest from se	•		a c	SEP	23 2013	101 141
	5a	Gross rents		•		1			- IN CORRES
		Net rental income or	(loss)	_	·	l l		DEN, U	PEOFIVED IN CORRES
9	6a b		m sale of asse			<u> </u>			IIHS
		assets on line 6a			· · · · · ·		0.		NOV 1 2 2019
ć	7	Capital gain net in	come (from Part IV, line	≘ 2) .			0.		1012
_	8	•	oital gain						OGDEN; UTAH
	9 10 a	Income modification Gross sales less return	ons	· · ·					OGDEN, OTT
		and allowances	• • •			-			
		Less Cost of goods so							
	1		s) (attach schedule)			<u> </u>			
	11	Utner income (atta	ach schedule) through 11	• • •	2,000,000.		0.		
-					0.				
9	13		cers, directors, trustees, et alaries and wages			 			
, }	15		ployee benefits						
, <u>, , , , , , , , , , , , , , , , , , </u>	15 16a		schedule)		· · · · · · · · · · · · · · · · · · ·				
Ú	֡֓֞֟֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֟֓֓֓֟֟ <u>֟</u>		attach schedule)						
SCANNED	ַבְּי נְּ		fees (attach schedule)						
SCANNED	17		· · · · · · · · · · · · · · · ·						
Ź	18		dule) (see instructions)						
Z !	19	•	ch schedule) and deple						
E f	20	, ,	· · · · · · · · · · · · · · ·						
_ <	۲I		s, and meetings						
JAN	21 22		cations		*				
<u> </u>	223		ttach schedule)	1					
1 6	23 24		nd administrative expe	J					
			gh 23	l l	0.				
2021	25		s, grants paid						
ŏ `	26	_	oursements Add lines 24 a		0.				0
•	27	Subtract line 26 fro							
			er expenses and disburse	ments	2,000,000.				
	b	Net investment in	come (if negative, ente	r -0-)			0.		
	c	Adjusted net incor	me (if negative, enter -0)-)					
JSA F			Act Notice, see instru						Form 990-PF (2018)

JSA For Paperwork Reduction Act Notice, see instructions. $^{8E1410\ 1\ 000}\ 36270F\ G69V$

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	Distance Charte	Attached schedules and amounts in the	Beginning of year		End o	f year
Part	T , Balance Sneets	description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Value
1	Cash - non-interest-bear	ing		2,000,0	00.	2,000,000.
2		cash investments				
3	-					
	•	ibtful accounts ▶				
4	Pledges receivable ▶					
		ibtful accounts ▶			ļ	
5						
6		officers, directors, trustees, and other				
		tach schedule) (see instructions)				
7		receivable (attach schedule)				
		ibtful accounts ▶				
8 15		se				
ssets o o		deferred charges				
		te government obligations (attach schedule).				
100		e stock (attach schedule)				
	•	e bonds (attach schedule)				
11	Investments - Longorate Investments - Land, building and equipment basis Less accumulated deprecia (attach schedule)	s, •		_		
12	•	loans				
13 14	Investments - other (atta Land, buildings, and	ach schedule) , , , , , , , , , , , , , , , , , , ,				
	Less: accumulated depreca (attach schedule)	ation >				
15	Other assets (describe					
16	Total assets (to be	completed by all filers - see the				
	instructions Also, see p	page 1, item I)	0.	2,000,0	00.	2,000,000
17	Accounts payable and a	accrued expenses				
18	Grants payable					
တ 19	Deferred revenue					
2 0	Loans from officers, director	ors, trustees, and other disqualified persons				1
Liabilities 22 22 22 22 22 22 22 22 22 22 22 22 22	Mortgages and other no	otes payable (attach schedule)				
□ 22	Other liabilities (describ	e ▶)				
23	Total liabilities (add line	es 17 through 22)	0.		0.	
ses	Foundations that follow	w SFAS 117, check here Land through 26, and lines 30 and 31.		-		
E 24	Unrestricted					
8 25	Temporarily restricted					
당 26						
Net Assets or Fund Balan 25 2 2 2 2 2 2 3 3 3 1	Foundations that do n and complete lines 27	ot follow SFAS 117, check here ▶ X through 31.				
O 27	Capital stock, trust prin	cipal, or current funds				
28	Paid-in or capital surplus, o	or land, bldg, and equipment fund				
\$ 29	Retained earnings, accum	ulated income, endowment, or other funds		2,000,0		
30	Total net assets or fund	d balances (see instructions)	0.	2,000,0	00.	
2 31	Total liabilities and	net assets/fund balances (see				
		<u>.</u>	0.	2,000,0	00.	
		inges in Net Assets or Fund Bala				
1 To	tal net assets or fund l	balances at beginning of year - Part	II, column (a), line 30 (must agree with		
en	d-of-year figure reporte	ed on prior year's return)		[1	0
2 En	ter amount from Part I	, line 27a		[2	2,000,000
3 Oti	her, increases not inclu	ded in line 2 (itemize) ▶			3	
					4	2,000,000
5 De	creases not included it	n line 2 (itemize) ►			5	
		palances at end of year (line 4 minus	line 5) - Part II, column (b), line 30	6	2,000,000

Page 3

Form **990-PF** (2018)

Par	দুIV	and Losses for Tax on Inv	estment Income		.	
		scribe the kind(s) of property sold (for	example, real estate,	(b) How acquired	(c) Date acquired	(d) Date sold
	2-story b	P - Purchase D - Donation	(mo , day, yr.)	(mo , day, yr)		
1 a						
<u>b</u>						
c						
d						
<u>e</u>						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) minu	
<u>a</u>						
b				<u> </u>		
<u>c</u>				<u></u>		
<u>d</u>				 		·
<u>е</u>			10.001.00	 		
	Complete only for assets s	howing gain in column (h) and owned	r · 		Gains (Col (h) ga	
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	(k), but not less t Losses (from co	
a						
<u>b</u>				<u> </u>		
<u> </u>						
<u>d</u>					· · · · · · · · · · · · · · · · · · ·	
е			<u> </u>	 		
2	Capital gain net income	or (net canital loss)	aın, also enter in Part I, line 7 oss), enter -0- in Part I, line 7	2		
3	· -	ain or (loss) as defined in sections				
	If gain, also enter in P	Part I, line 8, column (c) See ins	structions If (loss), enter -0- in $\}$			
				3		
Par	t V Qualification U	Under Section 4940(e) for Re	duced Tax on Net Investment I	ncome		
If se	ction 4940(d)(2) applies,	leave this part blank. NOT	r AVAILABLE FOR INITIAL	YEAR I	RETURNS	
		the section 4942 tax on the distribution't qualify under section 4940(e). I	outable amount of any year in the b Do not complete this part.	ase perio	d?	Yes No
1	Enter the appropriate as	mount in each column for each ye	ar, see the instructions before mak	ing any er	ntries	
Cale	(a) Base period years endar year (or lax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution ra (col (b) divided by	atio col (c))
	2017			1	,	,
	2016			1		
	2015			1		
	2014					
	2013					
2	Total of line 1, column ((d)		2		
3			de the total on line 2 by 5 0, or by			
	the number of years the	3				
	•		·			
4	Enter the net value of ne	oncharitable-use assets for 2018 f	from Part X, line 5	4		
5	Multiply line 4 by line 3.			5		· · · · · · · · · · · · · · · · · · ·
6	Enter 1% of net investm	nent income (1% of Part I, line 27b)		6		
7	Add lines 5 and 6			7		
_	_					
8	If line 8 is equal to or go Part VI instructions	tions from Part XII, line $4 \dots $ greater than line 7, check the box	on Part VI, line 1b, and complete	that part	using a 1% ta	x rate See the

	tvi Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	nstru		s)
	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)			
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0.
	here ▶ and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of \mathcal{J}			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			
3	Add lines 1 and 2			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			0.
6	Credits/Payments Credits/Payments			
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 6a			
b	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			<u> </u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ Refunded ▶ 11			
	t 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	4-	Yes	No X
	participate or intervene in any political campaign?	1a		
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	1b		х
	instructions for the definition	10		
	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	1c	1	х
	Did the foundation file Form 1120-POL for this year? Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
u	(1) On the foundation \$ \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
_	on foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities	.		
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		<u>X</u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		<u> </u>
	If "Yes," attach the statement required by General Instruction T	, }		
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		х	
_	conflict with the state law remain in the governing instrument?	6	X	
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		
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ► DE, TX,			
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	_ <u>x</u> _	
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 tax year beginning in 2018? See the instructions for Part XIV If "Yes,"			x 2
	complete Part XIV	9	_	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses .ATCH 1	10	х	

Par	t VII-A Statements Regarding Activities (continued)			
		57 M. 5 4 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	Yes	No
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	<u> </u>	X
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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ▶ N/A			
14	The books are in care of ▶ ROBERT KEVIN ROSE Telephone no ▶ 650-27)-354	0	
	Located at ▶3112 WINDSOR RD. #508 AUSTIN, TX ZIP+4 ▶ 78703			
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			
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authori		Yes	No
	over a bank, securities, or other financial account in a foreign country?	. 16	nhi" 11/2	X
	See the instructions for exceptions and filing requirements for FinCEN. Form 114 If "Yes," enter the name of	of Figure		1.4.
	the foreign country	高/制設	, <u></u>	6.1
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	150 et	Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	de de con	\$ (C S 2)	/部/-E
1a	During the year, did the foundation (either directly or indirectly) (1) Engage in the sale or exchange or leasing of property with a disqualified person? Yes X No.	(1770) (1770)		100
	(1) Engage in the sale of exchange, or leasing of property with a disqualined person.	100		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	disqualified person.		Control of the contro	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			STATE OF
	(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)?		ESS.	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		题,但	
	foundation agreed to make a grant to or to employ the official for a period after	18.40		
	termination of government service, if terminating within 90 days) Yes X No	1		
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	ه م ا		
	Organizations relying on a current notice regarding disaster assistance, check here			禁範
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			and the second
	were not corrected before the first day of the tax year beginning in 2018?	. 1c	<u> </u>	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	建	野川	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			17.
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and	100		15 All
	6e, Part XIII) for tax year(s) beginning before 2018? Yes X No			
	If "Yes," list the years ,,,,,,,			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	77,72994	ALC ST	
	(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	99E335	FROM
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<u> </u>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation of	-27734	STRICE STRICE	
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	Pa. Sa. 5200.		
	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	FIL TERM	100000	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	3b	F. 645.	THE STAR.
4~	foundation had excess business holdings in 2018)	•	†	X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	3775-A		S-153
D	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?		1	2
		Form QQ	n DE	/2010

ra	Statements Regarding Activities	TOT WINCH FORTH	4/20 May be Red	<u>quirea (continuea)</u>			
5a	During the year, did the foundation pay or incur any am-	ount to				Yes	No
	(1) Carry on propaganda, or otherwise attempt to influ	ence legislation (section	n 4945(e)) ²	. Yes X No	•		
`	(2) Influènce the outcome of any specific public ele	ection (see section 4	1955), or to carry o				
	directly or indirectly, any voter registration drive?				•		
	(3) Provide a grant to an individual for travel, study, or o	other similar purposes?	·	. Yes X No)		
	(4) Provide a grant to an organization other than a	charitable, etc., org	anization described				
	section 4945(d)(4)(A)? See instructions			Yes X No)		
	(5) Provide for any purpose other than religious, c	haritable, scientific, I	iterary, or education				
	purposes, or for the prevention of cruelty to children			•	I .		
b	If any answer is "Yes" to 5a(1)-(5), did any of the			· -)		
	Regulations section 53 4945 or in a current notice regard	rding disaster assistani	ce? See instructions.		5b_		
	Organizations relying on a current notice regarding disa				\sqcup		
С	If the answer is "Yes" to question 5a(4), does the	foundation claim e	xemption from the	tax			
	because it maintained expenditure responsibility for the	grant?		. Yes No	•		
	If "Yes," attach the statement required by Regulations s	ection 53 4945-5(d)					
6a	Did the foundation, during the year, receive any ful	•	• • • •				
	on a personal benefit contract?				•		
b	Did the foundation, during the year, pay premiums, dire	ectly or indirectly, on a	personal benefit contri	act?	6b		X
	If "Yes" to 6b, file Form 8870						
7a	At any time during the tax year, was the foundation a p		-		1		
b	If "Yes," did the foundation receive any proceeds or ha	•		tion?	7b		
8	is the foundation subject to the section 4960 tax on pa	• • •		□ 🐨	İ		
	remuneration or excess parachute payment(s) during the	year?	ndation Managar	Yes X No		l	L
	and Contractors		•		noyees,		
1	List all officers, directors, trustees, and foundat						
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) Expension	se accor	unt,
		devoted to position	enter -0-)	and deferred compensation			
ATC	H 2		0.	. 0.			0.
2	Compensation of five highest-paid employees	(other than thos	e included on lin	e 1 - see instruction	ons). If n	one.	enter
	"NONE."						
(2)	Name and address of each ampleyes and mem than \$50,000	(b) Title, and average	(a) Componentias	(d) Contributions to employee benefit	(e) Expen	se acco	unt,
(a)	Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred compensation	other al	lowance	es
	NONE						
		1					
		1					
Total	number of other employees paid over \$50,000						
	The state of the s				Form 99)_DE	(2010)

Form 990-PF (2018)

Form 990-PF (2018) Page 7 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors (continued) 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 0. Total number of others receiving over \$50,000 for professional services ▶ **Summary of Direct Charitable Activities** Part IX-A List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc. NONE 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 N/A All other program-related investments. See instructions 3 N/A

Form 990-PF (2018)

Adjusted qualifying distributions. Subtract line 5 from line 4

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

Form 990-PF (2018) Page 8 Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes 1a 83,333. 1c Fair market value of all other assets (see instructions). 83,333. 1d Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1e 2 83,333. 3 3 Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see 1,250. 4 82,083. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 5 6 765. Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating foundations Part XI and certain foreign organizations, check here ▶ and do not complete this part) 765. Tax on investment income for 2018 from Part VI, line 5 Income tax for 2018. (This does not include the tax from Part VI.). . 2b c 765. 3 Distributable amount before adjustments Subtract line 2c from line 1. Recoveries of amounts treated as qualifying distributions.......... 765. 5 5 6 6 7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, 765. 7 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1a 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., Amounts set aside for specific charitable projects that satisfy the 3a 3b Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

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

Form 990-PF (2018)

0.

Page 9 Form 990-PF (2018) Undistributed Income (see instructions) Part XIII (d) (a) (b) Corpus Years prior to 2017 2017 2018 1 Distributable amount for 2018 from Part XI, 765. 2 Undistributed income, if any, as of the end of 2018 a Enter amount for 2017 only. . . b Total for pnor years 20 16 ,20 15 ,20 14 3 Excess distributions carryover, if any, to 2018 a From 2013 **b** From 2014 c From 2015 d From 2016 e From 2017 f Total of lines 3a through e 4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ a Applied to 2017, but not more than line 2a . . . b Applied to undistributed income of prior years (Election required - see instructions). c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2018 distributable amount, e Remaining amount distributed out of corpus. . Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a).) Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b. c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b Taxable amount - see instructions Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount - see f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be 765. distributed in 2019. 7. Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions) . . . Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a Analysis of line 9 a Excess from 2014 . . . b Excess from 2015 . . .

Form **990-PF** (2018)

c Excess from 2016 . . . d Excess from 2017 . . . e Excess from 2018 . . .

Check here ► X 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,

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

Form 990-PF (2018)					Page 11
Part-XV Supple	ementary Information (continued)			
3 Grants and C	Contributions Paid Duri ecipient ress (home or business)	ng the Year or App	roved for	Future Payment	
, <u>Re</u>	ecipient	show any relationship to	status of	Purpose of grant or contribution	Amount
Name and addr	ress (home or business)	or substantial contributor	recipient	O MAN O COM	
a Paid during the	year				
•					
	•				
•					
				<u> </u>	
Total		<u> </u>		▶ 3a	
b Approved for fu	iture payment				
			}		
		•			
Total					
			<u>-</u>		

Page **12**

Part XVI	-A Analysis of Income-Prod	ucing Act	ivities			
Enter gross	amounts unless otherwise indicated	(a)	ated business income (b)	(c)	y section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program	n service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
a						
b						
c						
d	····					
		<u>_</u>				
f						
g Fees	and contracts from government agencies	-				· · · · · ·
2 Member	rship dues and assessments					· · · · -
	on savings and temporary cash investments •					
	ds and interest from securities			 		
	tal income or (loss) from real estate					
	t-financed property			- 		
	debt-financed property					
	al income or (loss) from personal property			-		
	loss) from sales of assets other than reventor			+		-
	loss) from sales of assets other than inventory					
	ome or (loss) from special events brofit or (loss) from sales of inventory					
	evenue a	-		-		
е						
12 Subtota	Add columns (b), (d), and (e)					
13 Total. A	dd line 12, columns (b), (d), and (e)				13	
(See works	heet in line 13 instructions to verify calci					
Part XVI	B Relationship of Activitie	s to the A	ccomplishment of E	xempt Pur	poses	<u></u>
Line No.	Explain below how each activit	v for which	n income is reported	ın column (e	e) of Part XVI-A contrib	uted importantly to the
▼	accomplishment of the foundation	-	•	-	-	
					 	
 -		· · ·				
				· · · · · · · · · · · · · · · · · · ·		
					<u> </u>	
	<u> </u>					
						
						·····
					····	
						
						

Form 99	0-'PF (20	18)	THE SAI	SEI FOUNDATIO	N			83-2599	773	Pag	e 13
Part 2		Information R Exempt Organ		ransfers to and	Transactio	ns and	Relationships \	Nith Nonc	harita	ble	
1 b				engage in any of t	he following	with any	other organization	described	,	res	No
` in		on 501(c) (other		501(c)(3) organi	-		-	1			
	-		a faundation t	o a noncharitable e	compt prope	zation of					
			_		_				12/1)		Х
•	•							T I			<u>X</u>
•	•	ansactions						`	14(2)		
			anharitable ev	empt organization					15/1	l	Х
				table exempt organiz							X
-	-			r assets					1		X
-											<u> X</u>
	•	•						í			<u> </u>
•	•	•		ship or fundraising so				ĺ		1	<u>x</u>
-	-			sts, other assets, or						i	<u>X</u>
	_		_	es," complete the						ur m	arket
				vices given by the r							
				ngement, show in c							
(a) Line		(b) Amount involved		noncharitable exempt or			cription of transfers, trans				
V-7		N/A	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			N/A	· · · · · · · · · · · · · · · · · · ·	<u>·</u>			
		`				_		_			
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					- · · · - · · ·				•		
d	escribe		(other than so wing schedule	affiliated with, or re ection 501(c)(3)) or (b) Type of				1		s X] No
				_		+					
						+					
					_						
	Under r	enalties of perlury. I decia	are that I have exam	mined this return, including	accompanying sch	redutes and	statements, and to the bes	t of my knowledg	e and be	lief, it	is true.
				taxpayer) is based on all info						-	
Sign		ain		19/11/	19	PRE	SIDENT	May the IRS			
Here	Signs	ture of officer or trustee.		Date	<u>., </u>	Title	7156111		parer sh		pelow?
	Signa	ture of officer or trustee		Date		ritte		See instructions	· 🔼	res _	No
		Print/Type preparer's na	me .	Preparer's signatui	· ·	77	Date		TIN		
Paid		JASON C GRAHA	_	r repaici s signatul	c W	X.	05/13/2019 s	"IECK [] "	P0044	250	10
Prepa	ror	. 73	DERSEN TA	V IIC			-l				-
-					<u>J</u>		Firm's E	IN ▶ 22-1.	L D / 30	7	
Use C	niy			LIPE, SUITE 4	400	770)57 Phone r	so 832-46	63-40	30	

832-463-4030 Form **990-PF** (2018)

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

9,

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

For the latest information.

OMB No 1545-0047

2018

Employer identification number

THE SAISEI FOUNDATI		83-2599773		
Organization type (check one	e)			
Filers of:	Section:			
Form 990 or 990-EZ	501(c)() (enter number) organization	•		
	4947(a)(1) nonexempt charitable trust not treated as a private found	dation		
	527 political organization			
Form 990-PF				
	501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation			
	501(c)(3) taxable private foundation	NOV 1 2 2019		
		OGDEN, UTAH		
Check if your organization is	covered by the General Rule or a Special Rule.			
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contribution or property) from any one contributor. Complete Parts I and II. See instructions contributions.			
Special Rules				
regulations under s 13, 16a, or 16b, ar \$5,000, or (2) 2% For an organization contributor, during literary, or education	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or ad that received from any one contributor, during the year, total contributions of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Contributions of described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive year, total contributions of more than \$1,000 exclusively for religious, chair and purposes, or for the prevention of cruelty to children or animals. Complete tenstead of the contributor name and address), II, and III	990-EZ), Part II, line of the greater of (1) mplete Parts I and II ceived from any one ritable, scientific,		
For an organization contributor, during contributions totale during the year for General Rule applies	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive year, contributions exclusively for religious, charitable, etc., purposes, but if d more than \$1,000. If this box is checked, enter here the total contributions than exclusively religious, charitable, etc., purpose. Don't complete any of the pases to this organization because it received nonexclusively religious, charitable, amore during the year	no such hat were received irts unless the		
990-EZ, or 990-PF), but it mu	t isn't covered by the General Rule and/or the Special Rules doesn't file Sched ist answer "No" on Part IV, line 2, of its Form 990, or check the box on line Ho to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 9	of its Form 990-EZ or on its		

Employer identification number 83-2599773

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					
1	TIMOTHY FERRISS 3112 WINDSOR RD. #508 AUSTIN, TX 78703	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
	,	\$	Person Payroll Noncash (Complete Part II for noncash contributions)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)					

Employer identification number

		83-2	599773
Part II	Noncash Property (see instructions) Use duplicate copies	s of Part II if additional space is ne	eeded.
(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
		_	
		 \$	
	1	T	I ————

Name of organization THE SAISEI FOUNDATION

Employer identification number 83-2599773

Part líl	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) are the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, et				
	contributions of \$1,000 or less for the Use duplicate copies of Part III if addition	year (Enter this information			
(a) No. from Part I	(b) Purpose of gift (c) Use of g			(d) Description of how gift is held	
	(e) Transferers, and ZIP + 4		er of gift Relationship of transferor to transferee		
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
Part I		(7)			
	(e) Transfer of gift				
	Transferee's name, address, and	I ZIP + 4	Relation	ship 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	I ZIP + 4	Relation	ship 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	Relations	ship of transferor to transferee	

ATTACHMENT 1

FORM 990PF, PART VII-A, LINE 10 - SUBSTANTIAL CONTRIBUTORS

THE SAISEI FOUNDATION

NAME AND ADDRESS

TIMOTHY FERRISS 3112 WINDSOR RD. #508 AUSTIN, TX 78703

EXPENSE ACCT AND OTHER ALLOWANCES ATTACHMENT 2 CONTRIBUTIONS BENEFIT PLANS TO EMPLOYEE COMPENSATION FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION NAME AND ADDRESS

GRAND TOTALS

TREASURER & SECRETARY

1.00

3112 WINDSOR RD. #508

TIMOTHY FERRISS

AUSTIN, TX 78703

PRESIDENT

1.00

ROBERT KEVIN ROSE 3112 WINDSOR RD. #508

AUSTIN, TX 78703

36270F G69V

ATTACHMENT 2