

For calendar year 2018, or tax year beginning 01-01-2018, and ending 12-31-2018

Name of foundation NEIL & AMELIA MCDANIEL CHARITABLE TRUST DTD 11/01/77		A Employer identification number 94-2450149	
Number and street (or P.O. box number if mail is not delivered to street address) 625 FAIR OAKS AVE SUITE 360		Room/suite	B Telephone number (see instructions) (626) 441-5188
City or town, state or province, country, and ZIP or foreign postal code SOUTH PASADENA, CA 91030		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) <b>\$ 7,978,561</b>	J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) <u>(Part I, column (d) must be on cash basis)</u>		

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> If the foundation is <b>not</b> required to attach Sch. B . . . . .				
	3 Interest on savings and temporary cash investments . . . . .	20,652	20,652		
	4 Dividends and interest from securities . . . . .	156,099	156,099		
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10 _____	-35,533			
	b Gross sales price for all assets on line 6a _____ 563,167				
	7 Capital gain net income (from Part IV, line 2) . . . . .		0		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances _____				
	b Less Cost of goods sold . . . . .				
Operating and Administrative Expenses	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .				
	12 <b>Total.</b> Add lines 1 through 11 . . . . .	141,218	176,751		
	13 Compensation of officers, directors, trustees, etc . . . . .	0	0		0
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .	225	67		158
	b Accounting fees (attach schedule) . . . . .	4,000	0		4,000
	c Other professional fees (attach schedule) . . . . .	131,028	32,757		98,271
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . . . .	315	315		0
	19 Depreciation (attach schedule) and depletion . . . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .				
	24 <b>Total operating and administrative expenses.</b> Add lines 13 through 23 . . . . .	135,568	33,139		102,429
	25 Contributions, gifts, grants paid . . . . .	323,000			323,000
	26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	458,568	33,139		425,429
	27 Subtract line 26 from line 12				
	a <b>Excess of revenue over expenses and disbursements</b>	-317,350			
	b <b>Net investment income</b> (if negative, enter -0-)		143,612		
c <b>Adjusted net income</b> (if negative, enter -0-)					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing . . . . .	844	786	786
	2 Savings and temporary cash investments . . . . .	282,466	280,168	280,168
	3 Accounts receivable ▶ <u>14,695</u>			
	Less allowance for doubtful accounts ▶ _____	17,994	14,695	14,695
	4 Pledges receivable ▶ _____			
	Less allowance for doubtful accounts ▶ _____			
	5 Grants receivable . . . . .			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	7 Other notes and loans receivable (attach schedule) ▶ _____			
	Less allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use . . . . .			
	9 Prepaid expenses and deferred charges . . . . .	2,448	1,969	1,969
	10a Investments—U S and state government obligations (attach schedule)	299,448	246,394	246,394
	b Investments—corporate stock (attach schedule) . . . . .	6,945,572	6,405,584	6,438,677
	c Investments—corporate bonds (attach schedule) . . . . .	309,781	100,558	100,558
	11 Investments—land, buildings, and equipment basis ▶ _____			
Less accumulated depreciation (attach schedule) ▶ _____				
12 Investments—mortgage loans . . . . .				
13 Investments—other (attach schedule) . . . . .	934,586	923,735	895,314	
14 Land, buildings, and equipment basis ▶ _____				
Less accumulated depreciation (attach schedule) ▶ _____				
15 Other assets (describe ▶ _____)				
16 <b>Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I)	8,793,139	7,973,889	7,978,561	
Liabilities	17 Accounts payable and accrued expenses . . . . .	10,971	9,959	
	18 Grants payable . . . . .			
	19 Deferred revenue . . . . .			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule) . . . . .			
	22 Other liabilities (describe ▶ _____)	85	60	
	23 <b>Total liabilities</b> (add lines 17 through 22) . . . . .	11,056	10,019	
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	24 Unrestricted . . . . .			
	25 Temporarily restricted . . . . .			
	26 Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>			
	27 Capital stock, trust principal, or current funds . . . . .	0	0	
	28 Paid-in or capital surplus, or land, bldg, and equipment fund	0	0	
	29 Retained earnings, accumulated income, endowment, or other funds	8,782,083	7,963,870	
30 <b>Total net assets or fund balances</b> (see instructions) . . . . .	8,782,083	7,963,870		
31 <b>Total liabilities and net assets/fund balances</b> (see instructions) .	8,793,139	7,973,889		

**Part III Analysis of Changes in Net Assets or Fund Balances**

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	8,782,083
2 Enter amount from Part I, line 27a . . . . .	<b>2</b>	-317,350
3 Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	7,730
4 Add lines 1, 2, and 3 . . . . .	<b>4</b>	8,472,463
5 Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	508,593
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	<b>6</b>	7,963,870

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
<b>1a</b> See Additional Data Table				
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				

  

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

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

  

<b>2</b> Capital gain net income or (net capital loss)	<div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div>	<b>2</b>	-35,533
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		<b>3</b>	

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017	396,817	8,349,474	0 047526
2016	403,970	7,738,909	0 052200
2015	402,094	8,301,389	0 048437
2014	356,601	8,087,270	0 044094
2013	333,878	7,681,424	0 043466

  

<b>2</b> Total of line 1, column (d)	<b>2</b>	0 235723
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	0 047145
<b>4</b> Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	<b>4</b>	8,030,352
<b>5</b> Multiply line 4 by line 3	<b>5</b>	378,591
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	1,436
<b>7</b> Add lines 5 and 6	<b>7</b>	380,027
<b>8</b> Enter qualifying distributions from Part XII, line 4	<b>8</b>	425,429

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

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

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	1,436
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	1,436
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	1,436
<b>6</b>	Credits/Payments		
<b>a</b>	2018 estimated tax payments and 2017 overpayment credited to 2018	<b>6a</b>	3,063
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	0
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	0
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	3,063
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>	0
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	<b>10</b>	1,627
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2019 estimated tax</b> <input type="checkbox"/> 1,627 <b>Refunded</b> <input type="checkbox"/>	<b>11</b>	0

**Part VII-A Statements Regarding Activities**

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

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	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. . . . .	<b>11</b>		<b>No</b>
<b>12</b>	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. . . . .	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>▶</b> N/A	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of <b>▶</b> WHITTIER TRUST COMPANY Telephone no <b>▶</b> (626) 441-5188			

Located at **▶** 625 FAIR OAKS AVE SUITE 360 SOUTH PASADENA CA ZIP+4 **▶** 91030

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

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

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

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

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

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

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

<b>1 List all officers, directors, trustees, foundation managers and their compensation. See instructions</b>				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ASHLEY FONTANETTA 625 FAIR OAKS AVE STE 360 SOUTH PASADENA, CA 91030	SECRETARY 2 00	0	0	0
WILLIAM GAGEN JR 625 FAIR OAKS AVE STE 360 SOUTH PASADENA, CA 91030	TREASURER 2 00	0	0	0
MARIANNE GAGEN 625 FAIR OAKS AVE STE 360 SOUTH PASADENA, CA 91030	VICE PRESIDENT 2 00	0	0	0
JOANNE DALE 625 FAIR OAKS AVE STE 360 SOUTH PASADENA, CA 91030	PRESIDENT 2 00	0	0	0
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
<b>Total number of other employees paid over \$50,000.</b>				0

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

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
WHITTIER TRUST COMPANY 625 FAIR OAKS AVE STE 260 SOUTH PASADENA, CA 91030	PHILANTHROPIC SERVICES & INVESTMENT MANAGEMENT	0
<b>Total</b> number of others receiving over \$50,000 for professional services. . . . . ►		0

**Part IX-A Summary of Direct Charitable Activities**

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

	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**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
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3 . . . . . ►	0

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	7,967,804
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	184,838
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	8,152,642
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	8,152,642
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	122,290
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	8,030,352
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	401,518

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

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	401,518
<b>2a</b>	Tax on investment income for 2018 from Part VI, line 5.	<b>2a</b>	1,436
<b>b</b>	Income tax for 2018 (This does not include the tax from Part VI).	<b>2b</b>	711
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	2,147
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	399,371
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	0
<b>5</b>	Add lines 3 and 4.	<b>5</b>	399,371
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	399,371

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	425,429
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	425,429
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	<b>5</b>	1,436
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	423,993

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



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
<b>1</b> Distributable amount for 2018 from Part XI, line 7				399,371
<b>2</b> Undistributed income, if any, as of the end of 2018				
<b>a</b> Enter amount for 2017 only. . . . .			141,852	
<b>b</b> Total for prior years 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2018				
<b>a</b> From 2013. . . . .				
<b>b</b> From 2014. . . . .				
<b>c</b> From 2015. . . . .				
<b>d</b> From 2016. . . . .				
<b>e</b> From 2017. . . . .				
<b>f</b> Total of lines 3a through e. . . . .	0			
<b>4</b> Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ 425,429				
<b>a</b> Applied to 2017, but not more than line 2a			141,852	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2018 distributable amount. . . . .				283,577
<b>e</b> Remaining amount distributed out of corpus	0			
<b>5</b> Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a) )	0			0
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions. . . . .		0		
<b>e</b> Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019 . . . . .				115,794
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .	0			
<b>8</b> Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions). . . .	0			
<b>9</b> Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a . . . . .	0			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2014. . . . .				
<b>b</b> Excess from 2015. . . . .				
<b>c</b> Excess from 2016. . . . .				
<b>d</b> Excess from 2017. . . . .				
<b>e</b> Excess from 2018. . . . .				

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

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. . . . . ▶

**b** Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

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

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

**a** The name, address, and telephone number or email address of the person to whom applications should be addressed

**b** The form in which applications should be submitted and information and materials they should include

**c** Any submission deadlines

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

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

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

Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b> Program service revenue				
a _____				
b _____				
c _____				
d _____				
e _____				
f _____				
<b>g</b> Fees and contracts from government agencies				
<b>2</b> Membership dues and assessments. . . . .				
<b>3</b> Interest on savings and temporary cash investments . . . . .				
		14	20,652	
<b>4</b> Dividends and interest from securities. . . . .				
		14	156,099	
<b>5</b> Net rental income or (loss) from real estate				
a Debt-financed property. . . . .				
b Not debt-financed property. . . . .				
<b>6</b> Net rental income or (loss) from personal property				
<b>7</b> Other investment income. . . . .				
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .				
		14	-35,533	
<b>9</b> Net income or (loss) from special events				
<b>10</b> Gross profit or (loss) from sales of inventory				
<b>11</b> Other revenue				
a BUCKEYE PARTNERS		14		
b OTHER REVENUE		14		
c DEFERRED TAX BENEFIT		01		
d INCOME TAX REFUND		01		
e _____				
<b>12</b> Subtotal Add columns (b), (d), and (e). . . . .				
	0		141,218	0
<b>13 Total.</b> Add line 12, columns (b), (d), and (e). . . . .				
			141,218	141,218

[illegible]

## Part XVII

	Yes	No
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<b>1a(1)</b>	<b>No</b>
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<b>1a(2)</b>		<b>No</b>
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<b>1b(1)</b>	<b>No</b>
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<b>1b(2)</b>	<b>No</b>
--------------	-----------

<b>1b(3)</b>		<b>No</b>
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<b>1b(4)</b>	<b>No</b>
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<b>1b(5)</b>	<b>No</b>
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<b>1b(6)</b>		<b>No</b>
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<b>1c</b>		<b>No</b>
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value  
ue

[illegible]

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

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

**b** If "Yes," complete the following schedule

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

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

\*\*\*\*\* 2019-11-15 \*\*\*\*\* May the IRS discuss this return with the preparer shown

Signature of officer or trustee \_\_\_\_\_ Date \_\_\_\_\_ Title \_\_\_\_\_

2019-11-15 \*\*\*\*\* May the IRS discuss this return

\*\*\*\*\* May the IRS discuss this

May the IRS discuss this  
return  
with the preparer shown  
below

(see instr )? ☒ Yes ☐ No

<b>Paid Preparer Use Only</b>	DEBORAH LYN DREHER		2019-11-15		
	Firm's name ► BUCKLEY PATCHEN				Firm's EIN ► 94-2302150

Print/Type preparer's name	Preparer's Signature	Date	PTIN
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DEBORAH LYN DREHER		2019-11-15	employed ▶ <input type="checkbox"/>
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Preparer's Signature	Date	PTIN
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Date	PTIN
------	------

2019-11-15	employed ▶ <input type="checkbox"/>	
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Check if self-employed ☐

PTIN

P00637618

Firm's name ▶	BUCKLEY PATCHEN	5	1	FIN ▶ 01-3333150
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Firm's EIN ▶ 94-2302150

Firm's address ►	2890 N MAIN ST SUITE 200
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WALNUT CREEK, CA 945972739 Phone no (925) 937-2727

Phone no (925) 937-2727

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1 200000 LOCAL INITIATIVES SUPPORT DEB		2017-08-28	2018-12-12
1 50000 US TREASURY NOTES		2015-11-02	2018-12-31
1989 SHS AT&T INC		2011-09-23	2018-04-27
514 SHS CARDINAL HEALTH INC		2014-12-29	2018-01-18
5354 SHRS GENERAL ELECTRIC		2014-12-29	2018-11-01
2092 SHRS GENERAL ELECTRIC		2014-12-29	2018-11-01
211 SHRS MCKESSON CORP		2014-12-29	2018-03-26
914 SHRS ORACLE CORP		2011-10-25	2018-01-01
491 TEXAS INSTRUS INC		2012-03-29	2018-05-01
BUCKEY PARTNERS		1989-01-24	2019-12-31

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
194,200		205,149	-10,949
50,000		50,000	0
65,776		61,997	3,779
36,734		41,914	-5,180
51,442		117,019	-65,577
28,448		33,221	-4,773
29,289		44,447	-15,158
43,985		28,684	15,301
50,749		16,269	34,480
2,507			2,507

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-10,949
			0
			3,779
			-5,180
			-65,577
			-4,773
			-15,158
			15,301
			34,480
			2,507

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
CAPITAL GAINS DIVIDENDS	P		

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
10,037			10,037

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			10,037

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ALAMEDA COUNTY COMMUNITY FOOD BANK INC PO BOX 2599 OAKLAND, CA 94614		170 (B)(1)(A)(VI)	GENERAL OPERATING SUPPORT	2,000
AMAZON WATCH 2201 BROADWAY STREET 508 OAKLAND, CA 94614		170 (B)(1)(A)(VI)	GENERAL OPERATING SUPPORT	1,000
ARTHRITIS FOUNDATION INC 657 MISSION ST SUITE 603 SAN FRANCISCO, CA 94105		170 (B)(1)(A)(VI)	GENERAL OPERATING SUPPORT	1,000
<b>Total . . . . . ▶ 3a</b>				323,000



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BAY AREA CRISIS NURSERY 1506 MENDOCINO DRIVE CONCORD, CA 94521		170 (B)(1)(A) (VI)	GENERAL OPERATING SUPPORT	1,000
BAY AREA LEGAL AID 1735 TELEGRAPH AVENUE OAKLAND, CA 94612		170 (B)(1)(A) (VI)	PROGRAM SUPPORT	25,000
BAY AREA URBAN NETWORKPOINTS OF LIGHT YOUTH MINISTRIES 735 - 105 TH AVENUE OAKLAND, CA 94603		509(A)(2)	GENERAL OPERATING SUPPORT	2,000
<b>Total . . . . . ▶ 3a</b>				323,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BRADY CENTER TO PREVENT GUN VIOLENCE 1225 I STREET NW SUITE 1100 WASHINGTON, DC 20005		170 (B)(1)(A) (VI)	GENERAL OPERATING SUPPORT	2,000
BRIGHTFOCUS FOUNDATION 22512 GATEWAY CENTER DR CLARKSBURG, MD 20871		170 (B)(1)(A) (VI)	GENERAL OPERATING SUPPORT	1,000
CANCER SUPPORT COMMUNITY SAN FRANCISCO BAY AREA 3276 MCNUTT AVENUE WALNUT CREEK, CA 94597		170 (B)(1)(A) (VI)	GENERAL OPERATING SUPPORT	1,000
<b>Total . . . . . ▶ 3a</b>				323,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CANTARE CON VIVO 1611 TELEGRAPH AVENUE SUITE 801 OAKLAND, CA 94612		170 (B)(1)(A) (VI)	GENERAL OPERATING SUPPORT	13,000
CAPITAL PUBLIC RADIO 7055 FOLSOM BLVD SACRAMENTO, CA 95826		170 (B)(1)(A) (VI)	GENERAL OPERATING SUPPORT	1,000
CARE USA151 ELLIS ST NE ATLANTA, GA 303032440		170 (B)(1)(A) (VI)	GENERAL OPERATING SUPPORT	2,000
<b>Total . . . . . ▶ 3a</b>				323,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CATHOLIC CHARITIES OF THE DIOCESE OF SANTA ROSA PO BOX 4900 SANTA ROSA, CA 95402		170 (B)(1)(A) (VI)	HOUSING & SHELTER SERVICES AND GENERAL OPERATING SUPPORT	25,000
CENTRO LABORAL DE GRATON PO BOX 42 GRATON, CA 95444		170 (B)(1)(A) (VI)	GENERAL OPERATING SUPPORT	2,000
CERES COMMUNITY PROJECT PO BOX 1562 SEBASTOPOL, CA 954731562		170 (B)(1)(A) (VI)	COMMUNITY GARDEN	5,000
<b>Total . . . . . ▶ 3a</b>				323,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
COLORADO COLLEGEPO BOX 1117 COLORADO SPRINGS, CO 80901		170 (B)(1)(A) (II)	GENERAL OPERATING SUPPORT	1,000
COMPASSION & CHOICESPO BOX 485 ETNA, NH 037500485		509(A)(2)	GENERAL OPERATING SUPPORT	5,000
CONTRA COSTA CRISIS CENTER PO BOX 3364 WALNUT CREEK, CA 94598		170 (B)(1)(A) (VI)	GENERAL OPERATING SUPPORT	1,000
<b>Total . . . . . ▶ 3a</b>				323,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CONTRA COSTA CLUBHOUSES 3024 WILLOW PASS RD SUITE 230 CONCORD, CA 94519		170 (B)(1)(A)(VI)	GENERAL OPERATING SUPPORT	7,000
DISCOVERY COUNSELING CENTER OF THE SAN RAMON VALLEY 115 TOWN COUNTRY DRIVE SUITE A DANVILLE, CA 94526		170 (B)(1)(A)(VI)	GENERAL OPERATING SUPPORT	1,000
EARLE BAUM CENTER OF THE BLIND INC 4539 OCCIDENTAL ROAD SANTA ROSA, CA 95401		170 (B)(1)(A)(VI)	GENERAL OPERATING SUPPORT	3,000
<b>Total . . . . . ▶ 3a</b>				323,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
EAST BAY INTEGRATED INC DBA HOSPICE OF EAST BAY 3470 BUSKIRK AVENUE PLEASANT HILL, CA 94523		170 (B)(1)(A) (VI)	GENERAL OPERATING SUPPORT	1,000
FINCA INTERNATIONAL INC 1101 14TH STREET N W SUITE 1101 WASHINGTON, DC 20005		170 (B)(1)(A) (VI)	GENERAL OPERATING SUPPORT	1,000
FOOD BANK CONTRA COSTA AND SOLANO PO BOX 6324 CONCORD, CA 945241324		170 (B)(1)(A) (VI)	GENERAL OPERATING SUPPORT	3,000
<b>Total . . . . . ▶ 3a</b>				323,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FRIENDS OF DANVILLE LIBRARY 400 FRONT STREET DANVILLE, CA 94506		509(A)(2)	GENERAL OPERATING SUPPORT	1,000
GENERATION CITIZEN110 WALL ST NEW YORK, NY 10005		170 (B)(1)(A) (VI)	GENERAL OPERATING SUPPORT	2,500
GIRLS INCORPORATED OF ALAMEDA COUNTY 13666 E 14TH ST SAN LEANDRO, CA 94578		509(A)(2)	BUILDING CAMPAIGN	1,000
<b>Total . . . . . ▶ 3a</b>				323,000



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
GLOBAL FUND FOR WOMEN 800 MARKET STREET SAN FRANCISCO, CA 94102		170 (B)(1)(A) (II)	GENERAL OPERATING SUPPORT	1,000
GLSEN90 BROAD STREET - 2ND FLOOR NEW YORK, NY 10004		170 (B)(1)(A) (VI)	GENERAL OPERATING SUPPORT	1,000
HABITAT FOR HUMANITY OF SONOMA COUNTY 3273 AIRWAY DRIVE SUITE E SANTA ROSA, CA 95403		170 (B)(1)(A) (VI)	GENERAL OPERATING SUPPORT	2,500
<b>Total . . . . .</b> ► <b>3a</b>				323,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HABITAT FOR HUMANITY EAST BAYSILICON VALLEY INC 2619 BROADWAY 205 OAKLAND, CA 94612		170 (B)(1)(A) (VI)	GENERAL OPERATING SUPPORT	1,000
HOLY NAMES HIGH SCHOOL 4660 HARBORD OAKLAND, CA 94618		170(B)(1)(A) (I)	GENERAL OPERATING SUPPORT	1,000
HOLY NAMES UNIVERSITY 3500 MOUNTAIN BLVD OAKLAND, CA 94619		170(B)(1)(A) (I)	DIGITAL INITIATIVE LEARNING PROGRAM	10,000
<b>Total . . . . . ▶ 3a</b>				323,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HOLY NAMES UNIVERSITY 3500 MOUNTAIN BLVD OAKLAND, CA 94619		170(B)(1)(A) (I)	MATCHING GRANT DIGITAL INITIATIVE LEARNING PROG	20,000
HUMANAS INC 500 W MAIN ST SUITE 208 LOUISVILLE, KY 40202		170 (B)(1)(A) (II)	GENERAL OPERATING SUPPORT	10,000
JONSSON CANCER CENTER FOUNDATION 8-950 FACTOR BLDG BOX 951780 LOS ANGELES, CA 900951780		170 (B)(1)(A) (VI)	GENERAL OPERATING SUPPORT	3,000
<b>Total . . . . . ▶ 3a</b>				323,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
KQEDNORTHERN CA PUBLIC BROADCASTING 2601 MARIPOSA STREET SAN FRANCISCO, CA 94110		170 (B)(1)(A)(VI)	GENERAL OPERATING SUPPORT	5,000
LAGUNA DE SANTA ROSA FOUNDATION 900 SANFORD ROAD SANTA ROSA, CA 95401		170 (B)(1)(A)(VI)	PROGRAM SUPPORT	2,000
LAST MILE HEALTH 2 ATLANTIC AVENUE 4TH FLOOR BOSTON, MA 02110		170 (B)(1)(A)(IV)	GENERAL OPERATING SUPPORT	5,000
<b>Total . . . . . ▶ 3a</b>				323,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
LIFEWATER INTERNATIONAL 75 ZACA LANE SUITE 100 SAN LUIS OBISPO, CA 93401		170 (B)(1)(A) (II)	GENERAL OPERATING SUPPORT	1,000
LIVING ROOM CENTER INC 1207 CLEVELAND AVE SANTA ROSA, CA 95401		170 (B)(1)(A) (II)	GENERAL OPERATING SUPPORT	3,000
MEALS ON WHEELS 1220 MORELLO AVE 210 MARTINEZ, CA 94553		170 (B)(1)(A) (VI)	GENERAL OPERATING SUPPORT	1,000
<b>Total . . . . . ▶ 3a</b>				323,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MUSIC FROM BEAR VALLEYPO BOX 5068 BEAR VALLEY, CA 95223		509(A)(2)	BEAR VALLEY MUSIC FESTIVAL	5,000
NATIONAL COLLEGIATE CANCER FOUNDATION 4858 BATTERY LANE 216 BETHESDA, MD 20814		509(A)(2)	GENERAL OPERATING SUPPORT	2,000
NATIONAL MULTIPLE SCLEROSIS SOCIETY 1700 OWENS STREET SUITE 190 SAN FRANCISCO, CA 94158		170 (B)(1)(A)(VI)	GENERAL OPERATING SUPPORT	1,000
<b>Total . . . . .</b> ► <b>3a</b>				323,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
NATURAL RESOURCES DEFENSE COUNCIL INC 40 WEST 20TH STREET NEW YORK, NY 10011		170 (B)(1)(A)(VI)	GENERAL OPERATING SUPPORT	6,000
NEXT STEP LEARNING CENTER INC 2222 CURTIS STREET OAKLAND, CA 94607		170 (B)(1)(A)(VI)	GENERAL OPERATING SUPPORT	10,000
NORTH VALLEY COMMUNITY FOUNDATION 240 MAIN STREET STE 260 CHICO, CA 95928		170 (B)(1)(A)(II)	NVCF CAMP FIRE RELIEF	16,000
<b>Total . . . . . ▶ 3a</b>				323,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
OXFAM - AMERICA INCPO BOX 7011 ALBERT LEA, MN 56007		170 (B)(1)(A) (VI)	GENERAL OPERATING SUPPORT	1,000
PARTNERS IN HEALTHPO BOX 845578 BOSTON, MA 022845578		170 (B)(1)(A) (VI)	GENERAL OPERATING SUPPORT	5,000
PLANNED PARENTHOOD SHASTA PACIFIC 2185 PACHECO STREET CONCORD, CA 94520		509(A)(2)	GENERAL OPERATING SUPPORT	6,000
<b>Total . . . . . ▶ 3a</b>				323,000



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
RANCHO CIELO INCPO BOX 6948 SALINAS, CA 93912		170 (B)(1)(A) (VI)	GENERAL OPERATING SUPPORT	3,000
REDWOOD CREDIT UNION COMMUNITY FUND 3033 CLEVELAND AVE STE 100 SANTA ROSA, CA 95403		509 (A)(1)	NORTH BAY FIRE RELIEF	5,000
REGENTS OF THE UNIVERSITY OF CALIFORNIA BERKELEY 131 DOE LIBRARY BERKELEY, CA 947206000		170 (B)(1)(A) (VI)	MARK TWAIN PROJECT	1,500
<b>Total . . . . . ▶ 3a</b>				323,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ROTACARE BAY AREA INCPO BOX 6461 SAN RAFAEL, CA 94903		170 (B)(1)(A) (VI)	GENERAL OPERATING SUPPORT	2,500
ROTARY CLUB OF SEBASTOPOL PO BOX 213 SEBASTOPOL, CA 95473		170 (B)(1)(A) (VI)	LEARN TO SWIM PROGRAM	4,000
SEBASTOPOL CENTER FOR THE ARTS 6780 DEPOT STREET SEBASTOPOL, CA 954723475		509(A)(2)	PROGRAM SUPPORT	4,000
<b>Total . . . . .</b> ► <b>3a</b>				323,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SEBASTOPOL COMMUNITY CULTURAL CENTER PO BOX 2028 SEBASTOPOL, CA 95473		509(A)(2)	PROGRAM SUPPORT	4,000
SENTINALS OF FREEDOM SCHOLARSHIP FUND PO BOX 1316 SAN RAMON, CA 94583		170 (B)(1)(A)(II)	GENERAL OPERATING SUPPORT	5,000
SHELTER INC OF CONTRA COSTA COUNTY 1815 ARNOLD DRIVE MARTINEZ, CA 94553		170 (B)(1)(A)(VI)	GENERAL OPERATING SUPPORT	4,000
<b>Total . . . . .</b>			<b>▶ 3a</b>	323,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SONOMA STATE UNIVERSITY 1801 EAST COTATI AVENUE ROHNERT PARK, CA 94928		170 (B)(1)(A) (VI)	GREEN MUSIC CENTER	5,000
SONOMA STATE UNIVERSITY ATHLETICS 1801 EAST COTATI AVENUE ROHNERT PARK, CA 94928		170 (B)(1)(A) (II)	MEN & WOMEN'S GOLF SCHOLARSHIPS	7,000
SOUTHERN POVERTY LAW CENTER 400 WASHINGTON AVENUE MONTGOMERY, AL 36104		170 (B)(1)(A) (VI)	GENERAL OPERATING SUPPORT	7,000
<b>Total . . . . .</b> ► <b>3a</b>				323,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ST MARY'S CENTER 925 BROCKHURST STREET OAKLAND, CA 94608		170 (B)(1)(A) (VI)	GENERAL OPERATING SUPPORT	2,000
ST MARY'S COLLEGEPO BOX 4300 MORAGA, CA 94575		170 (B)(1)(A) (VI)	FOR THE SCHOOL OF EDUCATION	1,000
STAND FOR FAMILIES FREE OF VIOLENCE 1410 DANZIG PLAZA SUITE 200 CONCORD, CA 94520		170 (B)(1)(A) (VI)	GENERAL OPERATING SUPPORT	1,000
<b>Total . . . . . ▶ 3a</b>				323,000

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
STEWARDS OF THE COAST AND REDWOODS PO BOX 2 DUNCANS MILLS, CA 95430		509(A)(2)	GENERAL OPERATING SUPPORT	6,000
THE CARTER CENTER 453 FREEDOM PKWY NE ATLANTA, GA 30307		170 (B)(1)(A)(II)	GENERAL OPERATING SUPPORT	1,000
THE RUTH BANCROFT GARDEN 1552 BANCROFT ROAD WALNUT CREEK, CA 94598		170 (B)(1)(A)(VI)	GENERAL OPERATING SUPPORT	1,000
<b>Total . . . . . ▶ 3a</b>				323,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
THE TREVOR PROJECT 8704 SANTA MONICA BLVD STE 200 WEST HOLLYWOOD, CA 90069		170 (B)(1)(A) (VI)	GENERAL OPERATING SUPPORT	1,000
UNIVERSITY OF CALIFORNIA BERKELEY FOUNDATION 2080 ADDISON ST 4200 BERKELEY, CA 947206000		170 (B)(1)(A) (VI)	CENTER FOR CIVILITY AND DEMOCRATIC ENGAGEMENT	10,000
UNIVERSITY OF CALIFORNIA LOS ANGELES 1309 MURPHY HALL BOX 951413 LOS ANGELES, CA 900951413		170 (B)(1)(A) (VI)	INSTITUTE FOR PURE AND APPLIED MATHEMATICS	3,000
<b>Total . . . . . ▶ 3a</b>				323,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
UNIVERSITY OF PUGET SOUND 1500 N WARNER STREET CMB1056 TACOMA, CA 984161056		170 (B)(1)(A) (II)	PUGET SOUND PARENTS	1,000
WESTAR INSTITUTE INC WILLAMETTE UNIVERSITY 900 STATE ST SALEM, OR 97301		509(A)(2)	GENERAL OPERATING SUPPORT	1,000
WOMEN FOR WOMEN INTERNATIONAL 2000 M STREET NW STE 200 WASHINGTON, DC 20036		170 (B)(1)(A) (VI)	GENERAL OPERATING SUPPORT	1,000
<b>Total . . . . .</b> ► <b>3a</b>				323,000



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WOMENSINGPO BOX 2014 ORINDA, CA 94563		509(A)(2)	IN HONOR OF ANN AND JIM PEARSON -	12,000
<b>Total . . . . .</b> ▶ <b>3a</b>				323,000

**TY 2018 Accounting Fees Schedule****Name:** NEIL & AMELIA MCDANIEL CHARITABLE TRUST

DTD 11/01/77

**EIN:** 94-2450149

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	4,000	0		4,000

## TY 2018 Investments Corporate Bonds Schedule

**Name:** NEIL & AMELIA MCDANIEL CHARITABLE TRUST

DTD 11/01/77

**EIN:** 94-2450149

### Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
CORPORATE BONDS	100,558	100,558

**TY 2018 Investments Corporate Stock Schedule****Name:** NEIL & AMELIA MCDANIEL CHARITABLE TRUST

DTD 11/01/77

**EIN:** 94-2450149**Investments Corporation Stock Schedule**

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
FIXED INCOME	380,297	380,296
FOREIGN EQUITIES	447,207	358,126
US LARGE CAP	4,559,795	4,884,732
US SMALL & MIDCAP	965,725	762,963
PREFERRED STOCK	52,560	52,560

**TY 2018 Investments Government Obligations Schedule****Name:** NEIL & AMELIA MCDANIEL CHARITABLE TRUST

DTD 11/01/77

**EIN:** 94-2450149**US Government Securities - End  
of Year Book Value:**

48,927

**US Government Securities - End  
of Year Fair Market Value:**

48,927

**State & Local Government  
Securities - End of Year Book  
Value:**

197,467

**State & Local Government  
Securities - End of Year Fair  
Market Value:**

197,467

**TY 2018 Investments - Other Schedule****Name:** NEIL & AMELIA MCDANIEL CHARITABLE TRUST

DTD 11/01/77

**EIN:** 94-2450149**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
BUCKEYE PARTNERS	AT COST	28,990	28,990
MUTUAL FUNDS	AT COST	797,061	797,061
REITS	AT COST	97,684	69,263

# TY 2018 Legal Fees Schedule

**Name:** NEIL & AMELIA MCDANIEL CHARITABLE TRUST

DTD 11/01/77

**EIN:** 94-2450149

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MISCELLANEOUS	225	67		158

**TY 2018 Other Decreases Schedule****Name:** NEIL & AMELIA MCDANIEL CHARITABLE TRUST

DTD 11/01/77

**EIN:** 94-2450149**Description****Amount**

CURRENT YEAR UNREALIZED GAIN

508,593



**TY 2018 Other Increases Schedule****Name:** NEIL & AMELIA MCDANIEL CHARITABLE TRUST

DTD 11/01/77

**EIN:** 94-2450149

Description	Amount
PRIOR YEAR ADJUSTMENT TO PARTNERSHIP BASIS AND ACCRUED LIABILITY	7,730

**TY 2018 Other Liabilities Schedule****Name:** NEIL & AMELIA MCDANIEL CHARITABLE TRUST

DTD 11/01/77

**EIN:** 94-2450149

Description	Beginning of Year - Book Value	End of Year - Book Value
DEFERRED EXCISE TAX PAYABLE	85	60

**TY 2018 Other Professional Fees Schedule****Name:** NEIL & AMELIA MCDANIEL CHARITABLE TRUST

DTD 11/01/77

**EIN:** 94-2450149

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
WTC ADMINISTRATION	131,028	32,757		98,271

**TY 2018 Taxes Schedule****Name:** NEIL & AMELIA MCDANIEL CHARITABLE TRUST

DTD 11/01/77

**EIN:** 94-2450149

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES PAID	315	315		0