Department of the Treasury

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. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

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			alendar year 2018 or tax year beginning		, 2018,	and end	ling	, 20
	N	am <u>e o</u>	foundation THE <u>MEAD</u> OWVIEW FOUN	DATION			A Employer identifica	tion number
	(C/9	KIM BESSOLO				94-3256658	
	Ň	umbe	r and street (or P O box number if mail is not delivered	to street address)		Room/sui	te B Telephone number	(see instructions)
		523	4TH STREET			200	(415) 459	-4472
0	, c	ity or t	town, state or province, country, and ZIP or foreign post	al code				
2019	<u>-</u>						C If exemption application pending, check here.	n is ▶
00	, –		RAFAEL, CA 94901					
. ©	G	Che	eck all that apply Initial return	Initial return	of a former p	ublic cha	Irity D 1 Foreign organization	is, check here 🕨 🔙
2			Final return	Amended re	turn		2 Foreign organization	
JAN	_		Address change	Name chang	е		85% test, check here computation	
_	H	<u>C</u> he	eck type of organization X Section 501	(c)(3) exempt private	foundation	\bigcirc	E If private foundation si	tatus was tarminated
ANNED		s	Section 4947(a)(1) nonexempt charitable trust	Other taxable pr	rivate foundat	tion O	under section 507(b)(1	
5	ī	Fair	market value of all assets at J Acco	ounting method X C	ash Acc	rual	F If the foundation is in	
2				ther (specify)			under section 507(b)(1)	
		16)	▶ \$ 143,622,204. (Part I,	column (d) must be on ca	ash basis)			
(O)		art	Analysis of Revenue and Expenses (The	(a) Revenue and	,,,,,		, , , , , , ,	(d) Disbursements
•••			total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	(b) Net inve		(c) Adjusted net income	for charitable purposes (cash basis only)
	_	1	Contributions, gifts, grants etc., received (attach schedule)				•	
3		2	Check X if the foundation is not required to attach Sch B.			٧.		
-	~	3	Interest on savings and temporary cash investments.	242,642.	24	2,642.		
4		′4	Dividends and interest from securities A	4,892,644.	4,89	2,644.		
',		5a	Gross rents					
		ь	Net rental income or (loss)	iper propaga a sector	t ti beriti belaiber a		1 " 1 , 1	17.1
	Revenue		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 46, 254, 199	-1,916,578.				
	ē	_	assets on line 6a			0.		
	Re	7	Capital gain net income (from Part IV, line 2)					
			Net short-term capital gain				RECEIVE	9-0
		9 10 a	Income modifications				1120	
		١.	and allowances	75 75 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	• · · · · · · · · · · · · · · · · · · ·	/ /	- O	nos atalogo and a data to a data to another to a
			Less Cost of goods sold		Today of the state	navajana majara ar a	100	181
		11	Gross profit or (loss) (attach schedule) Other income (attach schedule) ATCH 1	2,566.		2,566.		155
တ		12	Total. Add lines 1 through 11	3,221,274.		7,852.	OGDEN,]
2019	_	13	Compensation of officers, directors, trustees, etc.	0.				
4-	S	14	Other employee salaries and wages					
NOV 2	ıš	15	Pension plans, employee benefits					
<u>S</u>	be	162	Legal fees (attach schedule)					
~	Ж		Accounting fees (attach schedule)ATCH 2	49,659.	4	9,549.		110
_	Š	l	Other professional fees (attach schedule). [3]	621,421.		1,421.		
06 Heceived in 06 Batching Ogden	ati	17	Interest	· · · · · · · · · · · · · · · · · · ·				
ğĞ	str	18	Taxes (attach schedule) (see instructions)[4].	108,018.	5	8,018.		
<u>8</u> .5	Administrative	19	Depreciation (attach schedule) and depletion.	·				
₽ġ;	퉏	20	Occupancy					
ည္ဆို	Ă	l .	Travel, conferences, and meetings					
	밀	21 22	Printing and publications	-				
	<u>0</u>	23	Other expenses (attach schedule)					
	ij	23 24 25	Total operating and administrative expenses.			<u> </u>		
	ž	£4	Add lines 13 through 23	779,098.	72	8,988.		110
	ğ	25	Contributions, gifts, grants paid	9,025,000.				9,025,000
	٦	26	Total expenses and disbursements. Add lines 24 and 25	9,804,098.	72	8,988.	0.	9,025,110
	_	27	Subtract line 26 from line 12	. ,		· · · · · ·		1
			Excess of revenue over expenses and disbursements	-6,582,824.		•		1
			Not investment income (if negative, enter 0)	11 States Alman a 1	4.40	8,864	दार्वात सम्बाधिकाम स्थापन स्थापन	t - se d'i massay pompionassay
			Adjusted net income (if negative, enter -0-).	ा ः वातारम् वावासि स ।	⊕ / - m '/'			and the second second
	!		najasteu net movine (ii negative, enter "0").	l	L		1	1

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94-3256658

-	art I	Attached schedules and amounts in the	Beginning of year		of year
نا	artı	**Balance Sheets description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	9	Cash - non-interest-bearing			<u> </u>
	2	Savings and temporary cash investments		9,549,445	9,549,445
	3	Accounts receivable	Violandelpoje/noma/Venew sequencemion-amenin/Autina		
		Less allowance for doubtful accounts ▶			
	1		رون خانالىغىداللىغاللىغاللىداللايانى كالمراجعة معاصميات	, h 1 - 2	- -
	•	Less allowance for doubtful accounts ▶		***************************************	
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	Ū	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
	•	Less allowance for doubtful accounts			- "
S					
ssets	8	Inventories for sale or use			
Ass	9	Prepaid expenses and deferred charges			
•		Investments - U S and state government obligations (attach schedule). Investments - corporate stock (attach schedule) ATCH 5		134 072 759	. 134,072,759
	b	, , , , , , , , , , , , , , , , , , , ,		131,072,733	131,072,733
	11 C	Investments - corporate bonds (attach schedule) Investments - land, buildings.	1		11 1 1 1
		and coupment basis Less accumulated depreciation	A - TRANSPORT AND THE STREET, BE	A SECTION OF THE PROPERTY AND ASSESSED.	the transfer of a summary and the companies of the second supplication of t
		(attach schedule)			
	12	Investments - mortgage loans			
	13 14	Investments - other (attach schedule)		*····	
	14	equipment basis	brothelly <u>the second s</u>	ىيىنىلىلىلىنىنىنىسىدىن قىلىنى بىلىنى مىسىدىنى بىلىنىنىلىلىنىنىنى بىلىنى بىلىنى بىلىنى بىلىنى بىلىنى بىلىنى بىل ئالىنى ئىلىنىنى ئىلىنى ئىل	ا الاستخطاف عبدنات بار بالدار والمنظولة الاستناف المنظومة المنظومة المنظومة المنظومة المنظومة المنظومة المنظومة
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe ▶)			_
	16	Total assets (to be completed by all filers - see the			
\Box		instructions Also, see page 1, item I)	169,976,839.	143,622,204	143,622,204
	17	Accounts payable and accrued expenses			
	18	Grants payable	•		<u> </u>
es	19	Deferred revenue			
≣	20	Loans from officers, directors, trustees, and other disqualified persons			. !
Liabilities	21	Mortgages and other notes payable (attach schedule)			
7	22	Other liabilities (describe)			
\Box	23	Total liabilities (add lines 17 through 22)	0.	0	•
		Foundations that follow SFAS 117, check here ▶ X			1
Š		and complete lines 24 through 26, and lines 30 and 31.			
Ĕ	24	Unrestricted	169,976,839.	143,622,204	
ä	25	Temporarily restricted			1
B	26	Permanently restricted			1
Š		Foundations that do not follow SFAS 117, check here ▶			
Net Assets or Fund Balances		and complete lines 27 through 31.			
ﻕ	27	Capital stock, trust principal, or current funds			
뙮	28	Paid-in or capital surplus, or land, bldg, and equipment fund]
SS	29	Retained earnings, accumulated income, endowment, or other funds			
اک	30	Total net assets or fund balances (see instructions)	169,976,839.	143,622,204	
횔	31	Total liabilities and net assets/fund balances (see			
		instructions)	169,976,839.	143,622,204	. }
Р	art II	Analysis of Changes in Net Assets or Fund Bala	inces		•
		al net assets or fund balances at beginning of year - Part		must agree with	
		of-year figure reported on prior year's return)		l l	169,976,839
2		er amount from Part I, line 27a			-6,582,824
		er increases not included in line 2 (itemize) ▶		3	
		lines 1, 2, and 3			163,394,015
5		reases not included in line 2 (itemize) ► ATCH 6		5	19,771,811
		al net assets or fund balances at end of year (line 4 minus	s line 5) - Part II. column (143,622,204
<u> </u>	, 010	in the about of fatte balanood at one of year fille 4 filling			Form 990-PF (2018)

Form 990-PF (2018)					Page 3
	s and Losses for Tax on Inv	•	/b\	Γ-	
(a) List and de	(b) How acquired P - Purchase	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
	brick warehouse, or common stock, 200	sns WLC Co)	D - Donation		(, day, y.)
	TOUR		 	-	
			<u> </u>		1000
d				_	
	·		<u> </u>		
	(f) Depreciation allowed	(g) Cost or other basis	1	(h) Gain or (lo	ss)
(e) Gross sales price	(or allowable)	plus expense of sale		((e) plus (f) minu	
a					•
b			_		
С					
d					
е					
Complete only for assets	showing gain in column (h) and owned	by the foundation on 12/31/69		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			_		
b				·	
C					
d					
2 Capital gain net income	or (not capital loce)	aın, also enter ın Part I, line 7		_	
	(11 (1	oss), enter -0- in Part I, line 7	2	-1,	916,578.
	gain or (loss) as defined in sections				
*	Part I, line 8, column (c) See ins				•
Part I, line 8		<u> </u>	3		0.
		duced Tax on Net Investment I			
(For optional use by domest	ic private foundations subject to th	e section 4940(a) tax on net invest	ment inco	me)	
If section 4940(d)(2) applies	, leave this part blank				
184 4b form-d-Aren beliefer		and a distance of a service of		ل م	Yes X No
	rthe section 4942 tax on the distriction in the distriction and the distriction and the distriction are districted in the distriction and the distriction are districted in the	outable amount of any year in the b	ase peno	u,	j tes 🔼 No
		ar, see the instructions before make	ing any er	ntrios	
1 Enter the appropriate a			T any er	(d)	
Base period years	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
Calendar year (or tax year beginning in) 2017	6,600,085.	164,474,544.			0.040128
2017	8,751,048.	152,207,558.			0.057494
2015	9,266,069.	170,695,790.			0.054284
2013	3,750,000.	177,649,264.			0.021109
2013	2,565,000.	76,023,910.			0.033739
2013					
2 Total of line 1, column	(d)		2		0.206754
	tio for the 5-year base period - divid				
•	- ,	If less than 5 years	3		0.041351
the number of years the	e foundation has been in existence	ir less than 5 years			
4 Enter the net value of r	oncharitable use assets for 2018 t	from Part X, line 5	4	162,	284,274.
4 Enter the net value of r	ionichantable-use assets for 2010 i	nom raitX, inle 3		<u> </u>	·
E Multiply line 4 by line 2			5	6,	710,617.
5 Multiply line 4 by line 3					•
6 Fata 40/ af and according			6		44,089.
6 Enter 1% of net investr	nem income (1% of Paπ I, line 2/b)				
7 Add lines 5 and 6			7	6.	754,706.
7 Add lines 5 and 6					
9 Enter qualifiana distribi	itions from Part XII, line 4		8	9,	025,110.
8 Enter qualifying distribution 8 is equal to or	areater than line 7 check the hov	in Part VI, line 1b, and complete			
Part VI instructions	g. sator that mile i, check the box	are try and to a did complete	Puit		230 110

FORM 990-PF - PART IV CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kind of				ription		P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		TOTAL CAPITA					3,755,637.	
11627386.		SEE ATTACHME 13701397.	ENT A			7	VAR -1800550.	VAR
28285460.		SEE ATTACHME 24752267.	ENT B				VAR 3,533,193.	VAR
2,585,716.		SEE ATTACHME 9,990,574.	ENT C			7	VAR -7404858.	VAR
OTAL GAIN(L	oss)					-	-1916578.	
					:			

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948 - see	instru	ction	s)
1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1)			•	
. Date of ruling or determination letter (attach copy of letter if necessary - see instructions)	<u> </u>			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check	1		44,0	089.
here ► X and enter 1% of Part I, line 27b				
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of				
Part I, line 12, col (b)				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	2			
3 Add lines 1 and 2	3		44,0	
Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4			0
Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	5		44,0	089.
Credits/Payments				
a 2018 estimated tax payments and 2017 overpayment credited to 2018 6a 125, 187.	U ₁ 1	6.4		
b Exempt foreign organizations - tax withheld at source	1 1			
c Tax paid with application for extension of time to file (Form 8868) 6c]			
d Backup withholding erroneously withheld	ļ			
Total credits and payments Add lines 6a through 6d	7		125,1	L87.
Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			81,0	798.
Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ 81,098. Refunded ▶	11			
art VII-A Statements Regarding Activities				T
a During the tax year, did the foundation attempt to influence any national, state, or local legislati		 	Yes	No X
participate or intervene in any political campaign?		1a		_^
b Did it spend more than \$100 during the year (either directly or indirectly) for political purpose	es? See the			x
instructions for the definition		1b		<u>├</u> ^
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		4-		
c Did the foundation file Form 1120-POL for this year?		1c		_ ^
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year) .			
(1) On the loundation (2) On loundation managers (2)				
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax	k imposed			
on foundation managers \$		2		x
Has the foundation engaged in any activities that have not previously been reported to the IRS?				
If "Yes," attach a detailed description of the activities Has the foundation made any changes, not previously reported to the IRS, in its governing instrui	ment articles			
of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a	Х	
		4b	Х	
b If "Yes," has it filed a tax return on Form 990-1 for this year?		5		Х
If "Yes," attach the statement required by General Instruction T			-	
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 discovering instrument so the solution of the	rections that			
conflict with the state law remain in the governing instrument?		6	Х	
Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c),		7	Х	
a Enter the states to which the foundation reports or with which it is registered. See instructions				
CA,				
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Atto	rney General			
(or designate) of each state as required by General Instruction G ² If "No," attach explanation		8b	Х	
Is the foundation claiming status as a private operating foundation within the meaning of section	4942(j)(3) or	ļ		
4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part 2	XIV If "Yes,"			
annulate Part VIV		9		Х
complete Part XIV				
Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule	listing their			x

·

Pai	rt VII-A Statements Regarding Activities (continued)			_
			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		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
12	person had advisory privileges? If "Yes," attach statement See instructions	12		Х
42	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
13	AT / B			
	Website address ► N/A The books are in care of ► KIM BESSOLO Telephone no ► 415-459	-4472	2	
14	Located at \$\int 523 \ 4TH \ STREET \ SAN \ RAFAEL, \ CA \ ZIP+4 \ \ 94403			
4-	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			
15			• • •	ш
40	and enter the amount of tax-exempt interest received or accrued during the year	,	Yes	No
10	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority	16		х
	over a bank, securities, or other financial account in a foreign country?	—		- 1
Dai	the foreign country ► rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<u>.</u>
ı a		Τ	Yes	No
4-	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	 		1
та	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			
	(1) Engage in the sale of exchange, or leasing of property with a disquarmed person.			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disquaimed person			
	(0) Turnish goods, services, or racinities to (or accept them norm) a disquarities personnel.			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1		
	i i lv l			
	the benefit or use of a disqualified person)?			
	foundation agreed to make a grant to or to employ the official for a period after			
) IV			
_	termination of government service, if terminating within 90 days)			
D	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here	1.5		1
_	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
·	were not corrected before the first day of the tax year beginning in 2018?	1c		
•	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1		1
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
•	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and			l
a	6e, Part XIII) for tax year(s) beginning before 2018?			l
	If "Yes," list the years			
h	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
·	▶			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
-	at any time during the year?	-		
h	of "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or			
~	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2018)	3b		
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			لـــــــ
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		Х
		00	0 DE	10010

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rar	t VII-B Statements Regarding Activitie	s for Which Form	4720 May Be Rec	juired (con	itinuea)			
5a	During the year, did the foundation pay or incur any a	mount to					Yes	No
	(1) Carry on propaganda, or otherwise attempt to inf	luence legislation (sectio	n 4945(e))?	. Yes	X No			
-	(2) Influence the outcome of any specific public						1	
	directly or indirectly, any voter registration drive?			1	X No			
	(3) Provide a grant to an individual for travel, study, o				X No			
	(4) Provide a grant to an organization other than							
	section 4945(d)(4)(A)? See instructions	-			X No	ļ		
	(5) Provide for any purpose other than religious,							
	purposes, or for the prevention of cruelty to childre			I I .	X No	İ		
ь	If any answer is "Yes" to 5a(1)-(5), did any of the	ne transactions fail to	qualify under the e	exceptions de	escribed in			
	Regulations section 53 4945 or in a current notice reg					5b		
	Organizations relying on a current notice regarding dis	saster assistance, check	here		▶□]		
С	If the answer is "Yes" to question 5a(4), does the	ne foundation claim e	xemption from the t	ax				
	because it maintained expenditure responsibility for th	e grant?		Yes	No			
	If "Yes," attach the statement required by Regulations	section 53 4945-5(d)						
6a	Did the foundation, during the year, receive any	unds, directly or indire	ectly, to pay premiui	ms	_			
	on a personal benefit contract?			Yes	X No			
b	Did the foundation, during the year, pay premiums, d			act?		6b		Х
	If "Yes" to 6b, file Form 8870							
7a	At any time during the tax year, was the foundation a							
b	If "Yes," did the foundation receive any proceeds or b	nave any net income attr	ributable to the transact	ion?		7b		
8	Is the foundation subject to the section 4960 tax on p	payment(s) of more that	ın \$1,000,000 ın					
	remuneration or excess parachute payment(s) during t			. Yes	No			
Par	t VIII Information About Officers, Direct and Contractors	ors, Trustees, Fou	indation Manager	s, Hignly P	'aid Empio	yees,		
1	List all officers, directors, trustees, and found	ation managers and	their compensation	. See instru	ctions.			
•	List an eniledic, an estero, tractice, and reame							
		(b) Title, and average	(c) Compensation	(d) Contribi employee ber	utions to nefit plans	(e) Expens		
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contribi	utions to nefit plans	(e) Expens		
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribi employee ber	utions to nefit plans empensation			es
ATCH	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contribi employee ber	utions to nefit plans			
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribi employee ber	utions to nefit plans empensation			es
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribi employee ber	utions to nefit plans empensation			es
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribi employee ber	utions to nefit plans empensation			es
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribi employee ber	utions to nefit plans empensation			es
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribi employee ber	utions to nefit plans empensation			es
ATCF	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contribuent of the contribution of the con	utions to nefit plans ompensation	other all	lowance	0 ·
ATCH	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contribuent of the contribution of the con	utions to nefit plans ompensation	other all	lowance	0 ·
ATCH	(a) Name and address I 7 Compensation of five highest-paid employee "NONE."	(b) Title, and average hours per week devoted to position (c) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-) 0 .	(d) Contribi	instructions	other all	one,	0enter
ATCH	(a) Name and address I 7 Compensation of five highest-paid employee	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	e 1 - see (d) Contribient of the contribution of the contribut	instructions utions to benefit deferred	other all	one,	0. enter
ATCH	(a) Name and address I 7 Compensation of five highest-paid employee "NONE."	(b) Title, and average hours per week devoted to position (c) Cother than thos (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-) 0 .	e 1 - see	instructions utions to benefit deferred	s). If n	one,	0. enter
ATCI	(a) Name and address I 7 Compensation of five highest-paid employee "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (c) Cother than thos (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-) 0 .	e 1 - see (d) Contribient of the contribution of the contribut	instructions utions to benefit deferred	s). If n	one,	0. enter
ATCI	(a) Name and address I 7 Compensation of five highest-paid employee "NONE."	(b) Title, and average hours per week devoted to position (c) Cother than thos (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-) 0 .	e 1 - see (d) Contribient of the contribution of the contribut	instructions utions to benefit deferred	s). If n	one,	0. enter
ATCI	(a) Name and address I 7 Compensation of five highest-paid employee "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (c) Cother than thos (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-) 0 .	e 1 - see (d) Contribient of the contribution of the contribut	instructions utions to benefit deferred	s). If n	one,	0. enter
ATCI	(a) Name and address I 7 Compensation of five highest-paid employee "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (c) Cother than thos (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-) 0 .	e 1 - see (d) Contribient of the contribution of the contribut	instructions utions to benefit deferred	s). If n	one,	0. enter
ATCI	(a) Name and address I 7 Compensation of five highest-paid employee "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (c) Cother than thos (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-) 0 .	e 1 - see (d) Contribient of the contribution of the contribut	instructions utions to benefit deferred	s). If n	one,	0. enter
ATCI	(a) Name and address I 7 Compensation of five highest-paid employee "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (c) Cother than thos (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-) 0 .	e 1 - see (d) Contribient of the contribution of the contribut	instructions utions to benefit deferred	s). If n	one,	0. enter
ATCI	(a) Name and address I 7 Compensation of five highest-paid employee "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (c) Cother than thos (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-) 0 .	e 1 - see (d) Contribient of the contribution of the contribut	instructions utions to benefit deferred	s). If n	one,	0. enter
ATCI	(a) Name and address I 7 Compensation of five highest-paid employee "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (c) Cother than thos (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-) 0 .	e 1 - see (d) Contribient of the contribution of the contribut	instructions utions to benefit deferred	s). If n	one,	0. enter
ATCI	(a) Name and address I 7 Compensation of five highest-paid employee "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (c) Cother than thos (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-) 0 .	e 1 - see (d) Contribient of the contribution of the contribut	instructions utions to benefit deferred	s). If n	one,	0. enter

Form 990-PF (2018) Page 7 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, 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. **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 Summary of Program-Related Investments (see instructions) Amount Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 NONE All other program-related investments. See instructions 3 NONE

Form 990-PF (2018)

Pa	winimum investment Return (All domestic foundations must complete this part Fore see instructions)	ign tour	dations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
	Average monthly fair market value of securities	1a	157,159,126.
	Average of monthly cash balances	1b	7,596,482.
		1c	,,
C	·	1d	164,755,608.
e	Total (add lines 1a, b, and c)		,
e	1c (attach detailed explanation)		
_		2	
2	Acquisition indebtedness applicable to line 1 assets	3	164,755,608.
3	Subtract line 2 from line 1d	-	
4		4	2,471,334.
_	instructions)		162,284,274.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	8,114,214.
6	Minimum investment return. Enter 5% of line 5	6	0,114,214.
Pai	To the proof of t	ndations	
1	Minimum investment return from Part X, line 6	1	8,114,214.
	Tax on investment income for 2018 from Part VI, line 5		· · ·
4 d	Income tax for 2018 (This does not include the tax from Part VI).		
	Add lines 2a and 2b	2c	44,089.
	Distributable amount before adjustments Subtract line 2c from line 1		8,070,125.
3	Recoveries of amounts treated as qualifying distributions	4	
4 5	Add lines 3 and 4	5	8,070,125.
_	Deduction from distributable amount (see instructions)	6	
6 7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
′	·	7	8,070,125.
	line 1		- 0,0,0,123.
Pai	rt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	9,025,110.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	_	
а	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	9,025,110.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
-	Enter 1% of Part I, line 27b See instructions	5	44,089.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	8,981,021.
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		whether the foundation
	qualifies for the section 4940(e) reduction of tax in those years		

Pa	rt XIII Undistributed Income (see instr	uctions)			188
	-	(a)	(b) Years prior to 2017	(c) 2017	(d) 2018
1	Distributable amount for 2018 from Part XI,	Corpus	Tears prior to 2017	2017	
	line 7				8,070,125.
2	Undistributed income, if any, as of the end of 2018				ľ
а	Enter amount for 2017 only	<u></u>		7,388,650.	<u>'</u>
b	Total for pnor years 20 <u>16</u> ,20 <u>15</u> ,20 <u>14</u>				
3	Excess distributions carryover, if any to 2018				į
а	From 2013				
b	From 2014				
	From 2015				
d	From 2016				ı
e	From 2017				
	Total of lines 3a through e	0.			
	Qualifying distributions for 2018 from Part XII,				
-	line 4 ▶ \$ 9,025,110.				
а	Applied to 2017, but not more than line 2a			7,388,650.	
b	Applied to undistributed income of prior years				
	(Election required - see instructions)	/bbotsphilpspoos/1497d;		******************************	
c	Treated as distributions out of corpus (Election		a grate a tra-	great at the second second	ra i potro de d
	required - see instructions)				
d	Applied to 2018 distributable amount		- 18 1877 (blanck "hard beautiful		1,636,460.
	Remaining amount distributed out of corpus		مورد المارية ا		
5	Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same				
	amount must be shown in column (a))				<u>. </u>
6	Enter the net total of each column as			1 1	, }
	indicated below:				
	Corpus Add lines 3f, 4c, and 4e Subtract line 5				<u>-</u>
b	Prior years' undistributed income Subtract				
	line 4h from line 2b,			.,	
С	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				рассининција,
е	Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount - see				
	instructions				
f	Undistributed income for 2018 Subtract lines				
•	4d and 5 from line 1 This amount must be				C 400 CCE
	distributed in 2019				6,433,665.
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)				
8	Excess distributions carryover from 2013 not				
	applied on line 5 or line 7 (see instructions)				·
9	Excess distributions carryover to 2019.				
	Subtract lines 7 and 8 from line 6a	0.			
10	Analysis of line 9				i
	Excess from 2014				i
b	Excess from 2015				İ
	Excess from 2016				
	Excess from 2017				
	Excess from 2018				
					222 55

Pa	rt XIV Private Op	erating Foundations	(see instructions a	nd Part VII-A, questi	on 9) 1	NOT APPLICABLE
	If the foundation has	received a ruling or d	etermination letter that	t it is a private opera	ating	
	foundation, and the ruling					
	Check box to indicate v)(3) or 4942(j)(5)
	Enter the lesser of the ad-	Tax year	<u>-</u>	Prior 3 years		
	justed net income from Part	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
	I or the minimum investment	(0) 2010	(0) 20	(0) 25 15	(4,200)	
	return from Part X for each					
	year listed			-		
Ь	85% of line 2a					 -
C	Qualifying distributions from Part					
	XII, line 4 for each year listed .					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made					
	directly for active conduct of					
	exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
_	alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets(2) Value of assets qualifying					
	under section					
	4942(j)(3)(B)(i)					
D	"Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X,	_				
	line 6 for each year listed					
C	"Support" alternative test - enter					
	(1) Total support other than					
	gross investment income (interest, dividends, rents,					
	payments on securities			:		
	loans (section 512(a)(5)), or royalties)					
	(2) Support from general					
	public and 5 or more exempt organizations as					
	provided in section 4942					
	(j)(3)(B)(III)			<u></u>		
	(3) Largest amount of sup- port from an exempt					
	organization					
_	(4) Gross investment income.		Danielaka Abia wast	amba if the formula	tion had \$5 000 a	
Ра 	any time d	uring the year - see	instructions.)	only if the founda		or more in assets at
1	Information Regarding					
а	List any managers of	the foundation who h	nave contributed mor	e than 2% of the tota	al contributions received	ved by the foundation
	before the close of any	tax year (but only if th	iey have contributed in	nore than \$5,000) (So	ee section 507(d)(2))	
	NONE					
b	List any managers of	the foundation who	own 10% or more o	f the stock of a corp	oration (or an equall	y large portion of the
	ownership of a partner	ship or other entity) of	which the foundation	has a 10% or greater	ınterest	
	NONE					
2	Information Regarding	Contribution. Grant	. Gift. Loan. Scholarsh	ip, etc., Programs:		
_		=			table organizations	and does not accept
						nder other conditions,
	complete items 2a, b,			into, oto, to marriada	io or organizations a	naor outor comanione,
_	The name, address, a			no norson to whom any	lications should be add	dressed
а	rne name, address, a	na telephone number	or email address of tr	e person to whom app	bilcations should be acc	
b	The form in which app	lications should be sul	omitted and information	on and materials they	should include	
C	Any submission deadli	nes				
	-					
	Any restrictions or li	mitations on awards	such as by geogra	aphical areas, charita	ble fields, kinds of	institutions, or other
u	factors		,	. p. noon would write the	,	,

Part XV Supplementary Information (continued)								
3. Grants and Contributions Paid Dur	ing the Year or App	roved for	Future Payment					
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	or substantial contributor	recipient	Contribution					
a Paid during the year								
ATCH 8								
•								
Total		· <u></u>		9,025,000.				
b Approved for future payment								
		1						
Total	·	-						

JSA 8E1491 1 000

Part XVI	-A Analysis of Income-Prod	ucing Act	ivities		· · · · · · · · · · · · · · · · · · ·	
	amounts unless otherwise indicated	(a) Business code	(b) Amount	(c)	y section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
1 Program	n service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
b			•••	<u> </u>		
	.					
e				 	<u>-</u>	
7	and contrasts from government agencies				-	
-	and contracts from government agencies					*
	ship dues and assessments			14	242,642.	
	on savings and temporary cash investments - ds and interest from securities			14	4,892,644.	
	tal income or (loss) from real estate	Made to subdivide the C	e incompanies of a	- 1 1.0	रत । विवर्तानुष्ट व । एत । व प्रमात प्रत्यात वस्त कालता जीव तत्त्व कर ।	्रक र विवासिक सं - १ र वृत्तावार्थ विवासिक स्थापिक र उत्तरीत प्रावस्त संगापिक संग्रापक
	-financed property					
	debt-financed property					
	al income or (loss) from personal property					
	vestment income					
	loss) from sales of assets other than inventory			18	-1,916,578.	•
9 Net inco	ome or (loss) from special events					
	rofit or (loss) from sales of inventory					
	venue a					
b	ATCH 9				2,566.	
c						
d						
е					2 221 274	
	Add columns (b), (d), and (e)				3,221,274.	3,221,274.
	dd line 12, columns (b), (d), and (e).				13	3,221,274.
Part XVI-	heet in line 13 instructions to verify calc Relationship of Activitie		ccomplishment of E	vomnt Bur	2020	
Line No.	Explain below how each activit accomplishment of the foundation					
			•			
,						<u> </u>
						<u> </u>
						·
						,

JSA 8E1492 1 000

orm 99	0-PF (2018)	THE MEAD	OWVIEW FOUNDATI	ON		94-325	5658	Pa	ge 1 3
Part	XVII	Information R Exempt Organ		nsfers to and Tra	nsactions	and Relationshi	ps With None	harit	able	;
Ir	n sed					th any other organiza section 527, relatir			Yes	No
	•		o foundation to	a noncharitable exem	nt organizati	on of				
								1a(1)		x
										Х
		transactions								
(1) Sa	les of assets to a no	ncharitable exem	npt organization	· • • • • • • •			1b(1)		Х
				_						X
										X
								$\overline{}$		X
		_								X
				·				$\overline{}$		Х
d If	the alue	answer to any of thoof the goods, other	e above is "Yes assets, or servic	s," complete the followers given by the repo	owing sched orting founda	ule Column (b) shou ation If the foundation alue of the goods, of	uld always show on received less	the t	faır m	narke
(a) Line		(b) Amount involved		oncharitable exempt organiz		d) Description of transfers,				
•		N/A				/A				
		<u> </u>								
							 			
					·· ·					
								,		
	-									
								-		
			•			more tax-exempt or	ganizations		s X	
		," complete the follow	-	tion 501(c)(3)) or in s	ection 5277.			16	8 [JNO
		(a) Name of organization		(b) Type of orga	nızatıon	(c) D	escription of relations	hip		
NOT	APP	LICABLE								
		.								
				ed this return, including accompayer) is based on all information		es and statements, and to the er has any knowledge	e best of my knowledg	e and b	elief, it	is trui
Sign	E	STHER TORRES		19-3-1	9 T	REASURER	May the IRS with the pre			
lere	Sign	nature of officer or trustee		Date	Title		See instruction	_	Yes	N
	2	The Brit				D-1-		TIN		
امنط		Print/Type preparer's nar	110	Preparer's lignature	مرابره سه	Date	Check If F	PTIN		

415-498-5000 Form 990-PF (2018)

self-employed P00602311

Firm's EIN ▶ 13 - 4008324

08/30/2019

Phone no

94111

Paid

Preparer

Use Only Firm's address

ROBERT D FARR , PRINCIPAL

▶ PRICEWATERHOUSECOOPERS LLP

SAN FRANCISCO,

▶ THREE EMBARCADERO CENTER, 20TH FL

94-3256658

PART I - OTHER INCOME FORM 990PF,

EXPENSES PER BOOKS REVENUE AND

INVESTMENT $\frac{INCOME}{2,566}.$

DESCRIPTION SETTLEMENT PROCEEDS

TOTALS

2,566.

NET

2,566.

ATTACHMENT 1

FEES
ACCOUNTING
ı
ı Н
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Н

CHARITABLE	110.	110.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	49,549.	49,549.
REVENUE AND EXPENSES PER BOOKS	49,659.	49,659.
		TOTALS
DESCRIPTION	TAX PREPARER FEES	

94-3256658

ATTACHMENT 3

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

NET INVESTMENT INCOME	621,421.	621,421.
REVENUE AND EXPENSES PER BOOKS	621,421.	621,421.
DESCRIPTION	INVESTMENT MANAGEMENT FEES	TOTALS

FORM 990PF, PART I - TAXES

	NET	INVESTMENT	INCOME			58,018.	58,018.
REVENUE	AND	EXPENSES	PER BOOKS		.000,00	58,018.	108,018.
							TOTALS
			DESCRIPTION	25 T T T T T T T T T T T T T T T T T T T	FEDERAL EACTOR IMAES	FOREIGN TAXES PAID	

ATTACHMENT 4

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CORPORATE	
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ENDING <u>FMV</u>	24,101,170. 8,866,730. 6,670,870. 30,772,637. 13,808,389. 20,744,141. 18,358,531. 10,750,291.
ENDING BOOK VALUE	24,101,170. 8,866,730. 6,670,870. 30,772,637. 13,808,389. 20,744,141. 18,358,531. 10,750,291.
BEGINNING BOOK VALUE	29,299,925. 9,749,384. 6,838,514. 35,425,260. 15,272,252. 27,597,598. 29,312,095. 11,287,455.
DESCRIPTION	FIDUCIARY TRUST #6000 ATCH 10 FIDUCIARY TRUST #6010 ATCH 11 FIDUCIARY TRUST #6020 ATCH 12 FIDUCIARY TRUST #6030 ATCH 13 FIDUCIARY TRUST #6040 ATCH 14 FIDUCIARY TRUST #6050 ATCH 15 FIDUCIARY TRUST #6060 ATCH 15 FIDUCIARY TRUST #6061 ATCH 16 FIDUCIARY TRUST #6010 ATCH 17

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ATTACHMENT 6

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

TUUOMA

UNREALIZED LOSSES ON INVESTMENTS

19,771,811.

TOTAL

19,771,811.

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

V 18-6.4F

90C1I4 4178

EXPENSE ACCT AND OTHER ALLOWANCES				0.
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS				0
COMPENSATION				0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT & DIRECTOR	VICE PRES., SECRETARY & DIR.	TREASURER & DIRECTOR	GRAND TOTALS
NAME AND ADDRESS	KIM D. BESSOLO 523 4TH STREET SUITE 200 SAN RAFAEL, CA 94901	CHRISTINE Y. WISKEMANN 523 4TH STREET SUITE 200 SAN RAFAEL, CA 94901	ESTHER B. WISKEMANN TORRES 523 4TH STREET SUITE 200 SAN RAFAEL, CA 94901	

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CHILDREN OF THE NIGHT 14530 SYLVAN STREET VAN NUXS, CA 91411	PC	GENERAL SUPPORT	80,000
CHILDREN'S HOSPITAL & RESEARCH CENTER FOUNDATION 2201 BROADWAY SUITE 600 OAKLAND, CA 94612	. Od	GENERAL SUPPORT	200,000
DOCTORS WITHOUT BORDERS P O BOX 5030 HAGERSTOWN, MD 21741	Od.	GENERAL SUPPORT	500,000
EXPLORATORIUM SAN FRANCISCO PIER 17 SUITE 1000 SAN FRANCISCO, CA 94111	O d	GENERAL SUPPORT	20,000
HABITAT FOR HUMANITY EAST BAY/SILICON VALLEY 2619 BROADWAY OAKLAND, CA 94612	P.C.	GENERAL SUPPORT	000,000
MARINE MAMMAL CENTER 2000 BUNKER ROAD SAUSALITO, CA 94965	PC	GENERAL SUPPORT	1,000,000

V 18-6 4F

THE MEADOWVIEW FOUNDATION

ATTACHMENT 8 (CONT'D)

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
NOVATO COUMMUNITY HOSPITAL	PC	GENERAL SUPPORT	150,000
180 ROWLAND WAY NOVATO, CA 94945			
PEDIATRIC BRAIN TUMOR FOUNDATION	S	GENERAL SUPPORT	300,000
302 RIDGEFIELD CT			
ASHEVILLE, NC 28806			
PEGASUS VOYAGES	PC	GENERAL SUPPORT	40,000
1554 SONOMA AVE			
ALBANY, CA 94706			
			;
ST MARY'S COLLEGE OF CA	PC	GENERAL SUPPORT	2,000,000
1928 ST MARYS ROAD			
MORAGA, CA 94575			
THE MARIN SCHOOL	S a	GENERAL SUPPORT	100,000
150 N SAN PEDRO ROAD			
SAN RAFAEL, CA 94903			,
VETS HELPING HEROES	PC	GENERAL SUPPORT	200,000
8000 N FEDERAL HIGHWAY			
BOCA RATON, FL 33487			

THE MEADOWVIEW FOUNDATION

ATTACHMENT 8 (CONT.D)

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PART XV	
990PF,	
FORM	

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
WILDCARE	PC	GENERAL SUPPORT	200,000
76 ALBERT PARK LN SAN RAFAEL, CA 94901			
SAN FRANCISCO AND MARIN FOOD BANK - MARIN 75 DIGITAL DRIVE	PC	GENERAL SUPPORT	100,000
NOVATO, CA 94949			
BAKER INSTITUTE FOR CHILDREN WITH HEARING LOSS P O BOX 60962	PC	GENERAL SUPPORT	400,000
PALO ALTO, CA 94306			
HEARING HEALTH FOUNDATION 363 7TH AVENUE	PC	GENERAL SUPPORT	125,000
NEW YORK, NY 10001			
ST. JUDE CHILDREN'S RESEARCH HOSPITAL	PC	GENERAL SUPPORT	200,000
501 ST JUDE PLACE MEMPHIS, IN 38105			
MUSIC IN THE SCHOOLS 582 MARKET STREET	PC	GENERAL SUPPORT	100,000
SUITE 213 SAN FRANCISCO, CA 94104			

94-3256658

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 8 (CONT'D)

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
UC DAVIS SCHOOL OF VETERINARY MEDICINE ONE SHIELDS AVENUE	PC	GENERAL SUPPORT	1,500,000
DAVIS, CA 95616			
REDWINGS HORSE SANCTUARY	PC	GENERAL SUPPORT	75,000
47240 LOCKWOOD-JOLON RD			
LOCKWOOD, CA 93932			
AMERICAN RED CROSS DISASTER RELIEF	PC	GENERAL SUPPORT	300,000
PO BOX 97089			
WASHINGTON, DC 20090			
BREAST HEALTH SCHOLARSHIPS	PC	GENERAL SUPPORT	25,000
180 ROWLAND WAY			
NOVATO, CA 94945			
OSTEOPATHY'S PROMISE TO CHILDREN	PC	GENERAL SUPPORT	80,000
3706 RUFFIN ROAD			
SAN DIEGO, CA 92123			
DATATOCA DATA	CA	GRNERAL SHIDDORT	400
1150 SOUTH OLIVE STREET			
SUITE 2000			
LOS ANGELES, CA 90015			

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FORM 990-PF, PART XVI-A - ANALYSIS OF OTHER REVENUE

THE MEADOWVIEW FOUNDATION

94-3256658

ATTACHMENT 9

RELATED OR EXEMPT FUNCTION INCOME		
AMOUNT	2,566.	2,566.
EXCLUSION CODE	14	
AMOUNT		
BUSINESS CODE		
DESCRIPTION	SETTLEMENT PROCEEDS	TOTALS

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