Form **990**

EXTENDED TO MAY 15, 2020

Organization Exempt From R

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

| Department of the Treasury | |
|----------------------------|--|
| Internal Revenue Service | |

Go to www.irs.gov/Form990 for instructions and the latest information. For the 2018 calendar year, or tax year beginning JUL 1, 2018 and ending JUN 30, 2019 Check if C Name of organization D Employer identification number Address change THE GOLDMAN SACHS CHARITABLE GIFT FUND Name change GOLDMAN SACHS GIVES 11-3813663 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ 200 WEST STREET, 29TH FLOOR (212) 902-4223 termi ated City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ 514,399,513. Amende NEW YORK, NY 10282 H(a) Is this a group return Applica-F Name and address of principal officer: ANNE H. BLACK for subordinates? ... L Yes X No pendina SAME AS C ABOVE H(b) Are all subordinates included? Yes Tax-exempt status: X 501(c)(3) 501(c) (4947(a)(1) or) ◀ (insert no.) If "No," attach a list. (see instructions) Website: GOLDMANSACHS.COM/CITIZENSHIP/GOLDMAN-SACHS-GIVES H(c) Group exemption number Form of organization: X Corporation Trust Association L Year of formation: 2007 M State of legal domicile; DE Part I Summary Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O Activities & Governance Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 2 3 Number of voting members of the governing body (Part VI, line 1a) 6 Number of independent voting members of the governing body (Part VI, line 1b) 0 Total number of individuals employed in calendar year 2018 (Part V. line 2a) 6 Total number of volunteers (estimate if necessary) 22 7 a Total unrelated business revenue from Part VIII, column (C), line 12 0. ٥. b Net unrelated business taxable income from Form 990-T, line 38 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 158,774,595 141,208,762. Program service revenue (Part VIII, line 2g) 0. 9,749,030. 12,479,346. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) ٥. 11 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 168,523,625, 153,688,108. 155,608,014, 156,630,416, 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4) 14 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 0. b Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 913,774. 750,419. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 156,521,788. 157,380,835. Revenue less expenses. Subtract line 18 from line 12 12,001,837. -3,692,727. **Beginning of Current Year End of Year** 475,596,954. 20 Total assets (Part X, line 16) 475,478,329 Total liabilities (Part X, line 26) 4,370,294. 967,876. 471,108,035. 474,629,078. Net assets or fund balances. Subtract line 21 from line 20-Signature-Block Under penalties of perjury, Meclare 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 officer) is based on all information of which preparer has any knowledge Signature of officer Sign EMMETT C. ST. JOHN, TREASURER/CFO Here Type or print name and title Date PTIN parer's signature, Print/Type preparer's name . CPA GARRETT M. HIGGINS Paid aul m P00543209 2020 sell-employed Firm's name PKF O'CONNOR DAVIES Preparer 27-1728945 Firm's EIN Firm's address 665 FIFTH AVENUE **Use Only** Phone no. 212-286-2600 NEW YORK, NY 10022 X Yes May the IRS discuss this return with the preparer shown above? (see instructions) Form 990 (2018) LHA For Paperwork Reduction Act Notice, see the separate instructions. 832001 12-31-18

| orn | 1 990 (2018) THE GOLDMAN SACHS CHARITABLE GIFT FUND | 11-3813663 Page 2 |
|-----|---|---------------------|
| ra | rt III Statement of Program Service Accomplishments | [] |
| _ | Check if Schedule O contains a response or note to any line in this Part III | <u> </u> |
| 1 | Briefly describe the organization's mission: SEE SCHEDULE O | |
| | SEE SCREDULE U | |
| | | |
| | | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on the | |
| _ | prior Form 990 or 990-EZ? | Yes X No |
| | If "Yes," describe these new services on Schedule O. | |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program services? | Yes X No |
| • | If "Yes," describe these changes on Schedule O. | |
| 4 | Describe the organization's program service accomplishments for each of its three largest program services, as me | asured by expenses. |
| | Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, to | |
| | revenue, if any, for each program service reported. | • |
| 4a | (Code) (Expenses \$156,891,097. including grants of \$156,630,416.) (Revenue \$ | |
| | SEE SCHEDULE O | |
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| 4b | (Code) (Expenses \$ | |
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| 4c | (Code) (Expenses \$ including grants of \$) (Revenue \$ | |
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| 4d | Other program services (Describe in Schedule O.) | |
| | (Expenses \$ including grants of \$) (Revenue \$ |) |
| 4e | Total program service expenses 156,891,097. | |
| | • | Farm 990 (0010 |

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11-3813663

Form 990 (2018) THE GOLDMAN SACHS Part IV Checklist of Required Schedules

| | | | Yes | No_ |
|------|---|------------|-----|-------------|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? | | | |
| | If "Yes," complete Schedule A | 1 | X | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | _2 | Х | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for | | | v |
| _ | public office? If "Yes," complete Schedule C, Part I | 3 | | <u> </u> |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect | | | х |
| _ | during the tax year? If "Yes," complete Schedule C, Part II | 4 | | |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or | 5 | | х |
| 6 | similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to | | | |
| 0 | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6 | х | |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | | | |
| • | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | х |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete | | | |
| _ | Schedule D, Part III | 8 | | x |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for | | | |
| | amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? | | | |
| | If "Yes," complete Schedule D, Part IV | 9 | | x |
| 0 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent | | | |
| | endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | | х |
| 1 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X | | | |
| | as applicable. | | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, | | | |
| | Part VI | 11a | | X |
| b | Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total | | | |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | <u> </u> |
| С | Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total | | | v |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | × |
| a | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in | 444 | | х |
| _ | Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11d 11e | | x |
| | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | ı ie | | |
| • | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | x | |
| 2a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | | | |
| | Schedule D, Parts XI and XII | 12a | | х |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? | | | |
| | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | x | |
| 3 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | х |
| 4a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | Х | |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, | | | |
| | investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 | | | |
| | or more? If "Yes," complete Schedule F, Parts I and IV | 14b | х | |
| 5 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any | | | |
| _ | foreign organization? If "Yes," complete Schedule F, Parts II and IV | 15 | Х | |
| 6 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to | | | v |
| _ | or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | | Х |
| 7 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, | 4- | | х |
| 0 | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I | 17 | | |
| 8 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines | 18 | | х |
| 9 | 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," | 10 | | |
| • | complete Schedule G, Part III | 19 | | х |
| (Oa | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | x |
| | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |
| 1 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | | | |
| | domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II | 21 | х | |
| 2003 | 12-31-18 | Form | 990 | (2018) |

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Part IV Checklist of Required Schedules (continued)

| | | | Yes | No |
|----------|---|----------------|-------|------|
| 22 | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on | | | |
| | Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | Х |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current | ٠ | | |
| | and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete | | | |
| | Schedule J | 23 | | Х |
| 24 a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the | | | |
| | last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete | | | |
| | Schedule K. If "No," go to line 25a | 24a | | Х |
| | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| С | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease | | | |
| | any tax-exempt bonds? | 24c | | |
| | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 25 a | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit | | | х |
| L | transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | |
| D | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and | | | |
| | that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete | OFL | | х |
| 26 | Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or | 25b | | |
| 20 | former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? // "Yes." | | | |
| | complete Schedule L, Part II | 26 | | х |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial | 20 | | |
| | contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member | | | |
| | of any of these persons? If "Yes," complete Schedule L, Part III | 27 | | х |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV | | | |
| | instructions for applicable filing thresholds, conditions, and exceptions) | | | |
| а | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a | | X. |
| b | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28b | | Х |
| С | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, | | | |
| | director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | | х |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | Х | |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation | | | |
| | contributions? If "Yes," complete Schedule M | 30 | | Х |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? | | | |
| | If "Yes," complete Schedule N, Part I | 31 | | Х |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete | | | |
| | Schedule N, Part II | 32 | | Х |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | |
| | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | Х | |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and | | | |
| 0F - | Part V, line 1 | 34 | X | |
| | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | X | |
| Ь | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity | 054 | | x |
| 36 | within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | | |
| 30 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 | 36 | | х |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | 30 | - | |
| . | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | x |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? | -5, | | |
| | Note. All Form 990 filers are required to complete Schedule O | 38 | x | |
| Par | | | 1 | |
| | Check if Schedule O contains a response or note to any line in this Part V | | | |
| | | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | | | |
| | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 | | | |
| | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming | | | , |
| | (gambling) winnings to prize winners? | 1c | | |
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| Form | 990 (2018) THE GOLDMAN SACHS CHARITABLE GIFT FUND 11-381366 | 3 | P | age 5 |
|------|---|-----------|--|----------|
| Par | t V Statements Regarding Other IRS Filings and Tax Compliance (continued) | | | |
| * | | | Yes | No |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, | | | |
| | filed for the calendar year ending with or within the year covered by this return 2a 0 | | | |
| | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | | |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | | х |
| b | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O | 3b | | |
| | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a | | | |
| | financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | х | |
| | If "Yes," enter the name of the foreign country UNITED KINGDOM | | | |
| | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | | |
| | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | х |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | Х |
| С | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | 5c | | |
| | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit | | | |
| | any contributions that were not tax deductible as charitable contributions? | 6a | | х |
| | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts | | | |
| | were not tax deductible? | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | |
| | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | 7a | | x |
| | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | |
| С | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required | | | |
| | to file Form 8282? | 7c | | х |
| ď | If "Yes," indicate the number of Forms 8282 filed during the year 7d | - | | |
| | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | <u></u> - | | х |
| | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | Х |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | | |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the | | | |
| | sponsoring organization have excess business holdings at any time during the year? | 8 | | Х |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | |
| а | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | х |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | Х |
| 10 | Section 501(c)(7) organizations. Enter | | | |
| а | Initiation fees and capital contributions included on Part VIII, line 12 | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | | | l |
| 11 | Section 501(c)(12) organizations. Enter | | | |
| а | Gross income from members or shareholders 11a | | | ł |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against | | | |
| | amounts due or received from them.) | | ļ <u>. </u> | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | |
| а | Is the organization licensed to issue qualified health plans in more than one state? | 13a | | <u></u> |
| | Note. See the instructions for additional information the organization must report on Schedule O. | | | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which the | | | |
| | organization is licensed to issue qualified health plans | | | |
| C | Enter the amount of reserves on hand | | | L |
| | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | х |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O | 14b | <u> </u> | <u> </u> |
| 15 | Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or | | | |
| | excess parachute payment(s) during the year? | 45 | ı | ΙX |

Form **990** (2018)

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Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

If "Yes," see instructions and file Form 4720, Schedule N.

If "Yes," complete Form 4720, Schedule O.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X 6 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? <u>8a</u> х Х b Each committee with authority to act on behalf of the governing body? **8b** Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No Х 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, х and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X in Schedule O how this was done 12c Х 13 Did the organization have a written whistleblower policy? 13 X Did the organization have a written document retention and destruction policy? 14 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X a The organization's CEO, Executive Director, or top management official 15a Х b Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶SEE SCHEDULE 0 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website X Upon request ___ Another's website Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records EMMETT C. ST. JOHN, TREASURER/CFO - (212) 902-4223 200 WEST STREET, 29TH FLOOR, NEW YORK, NY

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

| (A) | (B) | | | | C) | | | (D) | (E) | (F) |
|-----------------------------------|-------------------|--------------------------------|---|---------|--------------|---------------------------------|--------|----------------------|------------------------------|-----------------|
| Name and Title | Average | | Position not check more than one unless person is both an | | | than o | | Reportable | Reportable | Estimated |
| | hours per week | | | | | s both r/trus | | compensation from | compensation from related | amount of other |
| | (list any | igi | | | | | | the | organizations | compensation |
| | hours for | g g | | | l | <u> </u> | | organization | (W-2/1099-MISC) | from the |
| | related | stee | trustee | | | Beusa | | (W-2/1099-MISC) | | organization |
| | organizations | lat Tr | onal 1 | | ploye | lie g | | | | and related |
| | below line) | Individual trustee or director | Institutional 1 | Officer | Кеу етріоуее | Highest compensated employee | Former | | | organizations |
| (1) JOHN F.W. ROGERS | 0.50 | | | | | | | | | |
| CHAIRMAN/DIRECTOR | 1.00 | Х | | Х | | | | 0. | 0. | 0. |
| (2) MUNEER A. SATTER | 0.50 | | | | | | | | ' | |
| VICE CHAIR/DIRECTOR | 1.00 | х | | х | | | | 0. | 0. | 0. |
| (3) PETER M. FAHEY | 0.50 | | İ | | | | | | | |
| DIRECTOR | 1.20 | Х | | | | | | 0. | 0. | 0. |
| (4) ROBERT J. KATZ | 0.50 | | | | | | | | | |
| DIRECTOR | 1.20 | Х | | | | | | 0. | 0. | 0. |
| (5) LAWTON FITT | 0.50 | | | | | | | | | |
| DIRECTOR | 1.00 | Х | | | | | | 0. | 0. | 0. |
| (6) LLOYD C. BLANKFEIN | 0.50 | | | | | | | | | |
| DIRECTOR (AS OF 5/16/19) | ļ | Х | | | | | | 0. | 0. | 0. |
| (7) BENJAMIN J. RADER | 5.75 | | | | | | | | | |
| GENERAL COUNSEL & ASST. SECRETARY | 12.25 | | | Х | | | | 0. | 0. | 0. |
| (8) JANE MOFFAT | 5.75 | | | | | | | | | |
| ASST. GENERAL COUNSEL & SECRETARY | 16.25 | | | Х | | | | 0. | 0. | 0. |
| (9) STEVE M. BUNSON | 0.30 | | | | | | | | | |
| VICE PRESIDENT | | | L | Х | L | | | 0. | 0. | 0. |
| (10) MICHAEL J. CIVITELLA | 0.25 | | l | | | | | | | |
| VICE PRESIDENT | | <u> </u> | | х | | | | 0. | 0. | 0. |
| (11) KENNETH R. SHEINMAN | 0.75 | l | | | | | | | | |
| ASSISTANT TREASURER | 0.25 | | | Х | | L | | 0. | 0. | 0. |
| (12) EMMETT C. ST. JOHN | 3.75 | | | | | | | | | |
| TREASURER/CFO | 9.25 | <u> </u> | | Х | | | | 0. | 0. | 0. |
| (13) EILEEN M. DILLON | 0.30 | ļ | | | | | | | | |
| VICE PRESIDENT | 1.00 | _ | L | Х | | | | 0. | 0. | 0. |
| (14) ANNE H. BLACK | 30.00 | | | | | 1 | | | | |
| PRESIDENT | 10.00 | <u> </u> | <u> </u> | Х | | | | 0. | 0. | 0. |
| (15) BRAD WEINSTEIN | 30.00 | | | | | | | | | |
| VICE PRESIDENT/COO | 10.00 | L | L., | Х | <u>L</u> | _ | | 0. | 0. | 0. |
| (16) THOMAS MORIN | 0.50 | | | | | | | | | |
| VICE PRESIDENT | 26.00 | | | X | | | | 0. | 0. | 0. |
| (17) JENNY MALONE | 0.20 | | | | | | | | | |
| VICE PRESIDENT | 20.00 | | | Х | | | | 0. | 0. | 0. |

832007 12-31-18

Form 990 (2018)

| Form 990 (2018) THE GOLDMAN S | ACHS CHARI | TAB | LE | GIF | T F | ממטי | | | 11-38 | 31366 | 3 | P | age 8 |
|---|------------------------|--|-----------------------|---------|--------------|------------------------------|--------------|----------------------------|-------------------|-----------|----------|---------|----------|
| Part VII Section A. Officers, Directors, Trust | tees, Key Emp | oloye | ees, | and | d Hig | ghes | t C | ompensated Employee | s (continued) | | | | |
| (A) | (B) | | | _ | C) | | | (D) | (E) | | | (F) | |
| Name and title | Average | Position (do not check more than | | | | | nna | Reportable | Reportable | • | E: | stimate | ed |
| | hours per | box, unless person is officer and a director/ | | | s both | an | compensation | compensation | on | amount of | | | |
| | week | \vdash | cer ar | nd a di | irecto | or/trus | tee) | from | from related | - | | other | |
| | (list any | ector | l | | | | | the | organization | | | pensa | |
| | hours for | or dir | es: | | | ated | | organization | (W-2/1099-MI | SC) | | rom th | |
| | related | stee | truste | | ۵ | bens | | (W-2/1099-MISC) | | | _ | janizat | |
| | organizations below | al tru | onal | | loye | ខ្លួ | | | | | | d relat | |
| | line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | | org | anızatı | ons |
| | 11116) | Ĕ | Ľ. | ē | ē. | 王旨 | Po | | | | | | |
| | | | | | | | | | | | | | |
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| | , | \vdash | | Н | | \vdash | | | | | | | |
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| | · | <u> </u> | <u> </u> | | <u> </u> | <u> </u> | _ | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| 1b Sub-total | | | | | | | lacksquare | 0. | | 0. | | | 0. |
| c Total from continuation sheets to Part VII | , Section A | | | | | | lacktriangle | 0. | | 0. | | | 0. |
| d Total (add lines 1b and 1c) | | | | | | | | 0. | | 0. | | | 0. |
| 2 Total number of individuals (including but no | ot limited to th | ose | liste | d ab | ove |) wh | o re | eceived more than \$100, | 000 of reportable | е | | | |
| compensation from the organization | | | | | | | | | | | | | 0 |
| | | | | | | | | | | | | Yes | No |
| 3 Did the organization list any former officer, | director, or tru | istee | . ke | v en | olan | vee. | or l | highest compensated er | nplovee on | | | | |
| line 1a? If "Yes," complete Schedule J for su | | | | , | | ,, | | | | | 3 | | |
| 4 For any individual listed on line 1a, is the su | | ۰. | mne | nea | tion | and | oth | ner compensation from t | ne organization | | | | |
| and related organizations greater than \$150 | | | | | | | | | lo organization | | 4 | | X |
| 5 Did any person listed on line 1a receive or a | | | | | | | | | lual for convoca | | | | |
| | | | | | | | iau | ed organization of individ | iuai ioi services | | <u> </u> | | |
| rendered to the organization? If "Yes." com. Section B. Independent Contractors | olete Schedule | <u>J 10</u> | or su | ich r | oers | on | | | | | 5 | L | |
| | | | _ | | | | | | 100.000 1 | | | | |
| 1 Complete this table for your five highest cor | | | | | | | | | | pensa | tion fr | om | |
| the organization. Report compensation for t | <u>he calendar ye</u> | ear e | ndır | ng w | ith c | or wit | thin | the organization's tax y | ear. | | | | |
| (A) | | | | | | | | (B) | | _ | | C) . | |
| Name and business | address | | | | | | _ | Description of s | ervices | | ompe | nsatio | <u>n</u> |
| CHARITIES AID FOUNDATION AMERICA | | | | | | | | | | | | | |
| KING STREET STATION, ALEXANDRIA, VA 2 | 2314 | | | | | | | GRANT ADMINISTRATI | ON | | | 204, | 714. |
| PRICEWATERHOUSECOOPERS LLP, P.O. BOX | | | | | | | | | | | | | |
| 7247-8001, PHILADELPHIA, PA 19170-8001 AUDIT SERVICES 1 | | | | | | | 160, | 158. | | | | | |
| STELLAR TECHNOLOGY SOLUTIONS, LLC, 61 | | | | | | | 寸 | | | | | | |
| MAIN STREET, SUITE 200, STROUDSBURG, PA INFORMATION TECHNOLOGY | | | | | | | 158 | 342. | | | | | |
| | | | | | | | T | | | | | , | |
| , | | | | | | | | | | | | | |
| | | | • | | | | \dashv | | | | | | |

Form **990** (2018)

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

| Pa | <u>rt VI</u> | II Statement of Rever | nue | | | | | |
|--|--------------|---|--------------------|---------------------|----------------------|--|---|--|
| | _ | Check if Schedule O cont | tains a response o | or note to any line | | | | |
| | | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512 - 514 |
| nts Its | 1 a | Federated campaigns | 1a | | | | | |
| irar | t | Membership dues | 1b | | | : | | |
| S, E | c | : Fundraising events | 1c | | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | c | Related organizations | 1d | | | | | |
| is, (| • | Government grants (contribut | tions) 1e | | | | | |
| tion | f | All other contributions, gifts, grar | 1 1 | | | | | |
| ib di | | similar amounts not included abo | ove 1f | 141,208,762. | | | | |
| d d | ç | Noncash contributions included in lines | 1a-1f \$ | 20,172,746. | | | | |
| <u>Q</u> g | ŀ | Total. Add lines 1a-1f | | , | 141,208,762. | | | |
| | | | | Business Code | | | | |
| Se | 2 a | · | | | | | | |
| e Z | t | | | | | | | |
| n S | • | | | | | | | |
| ag Bey | C | | | - | | , | | |
| Program Service Revenue | • | All | | | | | | |
| ъ. | • | All other program service reve | enue | | | | | |
| _ | 3 | Total. Add lines 2a-2f Investment income (including | dividende intere | | | | | |
| | 3 | other similar amounts) | dividends, intere | st, and | 9,787,810. | | | 9,787,810. |
| | 4 | Income from investment of ta | x-exempt bond p | roceeds | 7,11,71210 | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| | 5 | Royalties | a cacinpt bond p | .00000 | | | | |
| | • | . leyallee | (i) Real | (ii) Personal | | | | |
| | 6 a | Gross rents | | | | | | |
| | | Less: rental expenses | | | | | | |
| | | : Rental income or (loss) | | | | | | |
| | | Net rental income or (loss) | | • | | | | |
| | 7 a | Gross amount from sales of | (i) Securities | (iı) Other | | | | - |
| | | assets other than inventory | 363,402,941. | | | | | |
| | t | Less: cost or other basis | | | | | | |
| | • | and sales expenses | 360,711,405. | | | | | |
| | c | Gain or (loss) | 2,691,536. | L | | | | |
| | | Net gain or (loss) | | | 2,691,536. | | | 2,691,536. |
| e e | 8 a | Gross income from fundraisin | | | | | | |
| enr | | including \$ | | | | | | |
| Rev | | contributions reported on line | 1c). See | | | | | |
| Other Revenue | | Part IV, line 18 | a | | | | | |
| ㅎ | | Less: direct expenses Net income or (loss) from fund | b drawna aventa | | | - | | |
| | | Gross income from gaming a | - | | | | | |
| | 3 6 | Part IV, line 19 | | | | | | |
| | | Less direct expenses | a b | | | | | |
| | | : Net income or (loss) from gan | | | | | | |
| | | Gross sales of inventory, less | _ | | | | | |
| | | and allowances | а | | | | | |
| | Ŀ | Less: cost of goods sold | - b | | | | | |
| | | : Net income or (loss) from sale | | · • | · | | | |
| | | Miscellaneous Revenu | | Business Code | | | | |
| | 11 a | | | | | | | |
| | t | | | | | | | |
| | c | · | | | | | | |
| | c | All other revenue | | | | | | |
| | e | Total. Add lines 11a-11d | | | | | | |
| | 12 | Total revenue See instructions | | ▶ [| 153 688 108. | 0. | 0. | 12 479 346 |

| | | | | | |
|------------|--|-----------------------------|------------------------------|-------------------------------------|---------------------------------------|
| Sect | on 501(c)(3) and 501(c)(4) organizations must compl | lete all columns All othe | r organizations must con | nplete column (A). | |
| | Check if Schedule O contains a respons | se or note to any line in t | | | |
| | not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| 1 | Grants and other assistance to domestic organizations | | | | |
| | and domestic governments. See Part IV, line 21 | 151,402,565. | 151,402,565. | | |
| 2 | Grants and other assistance to domestic | | | | |
| | individuals. See Part IV, line 22 | | | | |
| 3 | Grants and other assistance to foreign | - : :: | | | <u> </u> |
| | organizations, foreign governments, and foreign | | | | |
| | individuals. See Part IV, lines 15 and 16 | 5,227,851. | 5,227,851. | _ | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, | | | | |
| | trustees, and key employees | | | | |
| 6 | Compensation not included above, to disqualified | | | | - |
| | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | | | | |
| 8 | Pension plan accruals and contributions (include | | | | |
| | section 401(k) and 403(b) employer contributions) | | | | |
| 9 | Other employee benefits | | | | |
| 10 | Payroll taxes | | | | • |
| 11 | Fees for services (non-employees): | | | | |
| а | Management | | | | |
| b | Legal | 98,252. | 2,278. | 95,974. | |
| С | Accounting | 211,451. | | 211,451. | |
| d | Lobbying | | | | |
| е | Professional fundraising services. See Part IV, line 17 | | | | |
| f | Investment management fees | | | | |
| g | Other. (If line 11g amount exceeds 10% of line 25, | | | | |
| | column (A) amount, list line 11g expenses on Sch O.) | | | | |
| 12 | Advertising and promotion | | | | |
| 13 | Office expenses | | | | |
| 14 | Information technology | 50,263. | | 50,263. | |
| 15 | Royalties | | | | |
| 16 | Occupancy . | | | | |
| 17 | Travel | 30,423. | | 30,423. | |
| 18 | Payments of travel or entertainment expenses | | | | |
| | for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | | | | |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | | | | |
| 23 | Insurance | 73,630. | | 73,630. | |
| 24 | Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | | | | |
| а | GRANTS ADMINISTRATION | 253,070. | 253,070. | - | " |
| b | MISCELLANEOUS EXPENSES | 33,330. | 5,333. | 27,997. | |
| c | | · | , | ' | |
| d | | İ | | | · · · · · · |
| | All other expenses | 1 | | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 157,380,835. | 156,891,097. | 489,738. | 0. |
| <u> 26</u> | Joint costs. Complete this line only if the organization | | - | | · · · · · · · · · · · · · · · · · · · |
| | reported in column (B) joint costs from a combined | | | | |
| | educational campaign and fundraising solicitation. | | | | |
| | Charly have | | | | |

| Pa | rt X | Balance Sheet | | | _ | |
|----------------------------|-------|--|--|--------------------------|--------------|--------------------|
| | | Check if Schedule O contains a response or not | e to any line in this Part X | | | |
| | | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash - non-interest-bearing | - | 1 | | |
| | 2 | Savings and temporary cash investments | 788,408. | 2 | 631,450. | |
| | 3 | Pledges and grants receivable, net | · · | 3 | | |
| | 4 | Accounts receivable, net | | 4 | | |
| | 5 | Loans and other receivables from current and fo | | | | |
| | | trustees, key employees, and highest compensa | ted employees. Complete | | | |
| | | Part II of Schedule L | | | 5 | |
| | 6 | Loans and other receivables from other disqualif | | | | |
| | | section 4958(f)(1)), persons described in section | 4958(c)(3)(B), and contributing | | | |
| | | employers and sponsoring organizations of sect | | | | |
| र | | employees' beneficiary organizations (see instr). | | 6 | | |
| Assets | 7 | Notes and loans receivable, net | | | 7 | |
| ₹ | 8 | Inventories for sale or use | | | 8 | |
| | 9 | Prepaid expenses and deferred charges | | | 9 | |
| | 10a | Land, buildings, and equipment cost or other | | | | |
| | | basis. Complete Part VI of Schedule D | 10a | | | |
| | b | Less accumulated depreciation | 10b | | 10c | |
| | 11 | Investments - publicly traded secunties | 473,042,094. | 11 | 473,192,444. | |
| | 12 | Investments - other securities. See Part IV, line 1 | | 12 | | |
| | 13 | Investments - program-related. See Part IV, line | ¹ | | 13 | |
| | | Intangible assets | - | | 14 | |
| | 15 | Other assets. See Part IV, line 11 | | 1,647,827. | 15 | 1,773,060. |
| | | Total assets. Add lines 1 through 15 (must equa | 475,478,329. | 16 | 475,596,954. | |
| | 17 | Accounts payable and accrued expenses | - | 3,248,294. | 17 | 567,876. |
| | 18 | Grants payable | - | 1,122,000. | 18 | 400,000. |
| | 19 | Deferred revenue | - | | 19 | |
| | 20 | Tax-exempt bond liabilities Escrow or custodial account liability. Complete F | Sant IV of Cobodula D | | 20 | |
| | 21 22 | Loans and other payables to current and former | The state of the s | | 21 | |
| Liabilities | 22 | key employees, highest compensated employee | | | | |
| <u>=</u> | | Complete Part II of Schedule L | s, and disqualified persons. | | 22 | , |
| <u>.</u> | 23 | Secured mortgages and notes payable to unrela | ted third parties | | 23 | · |
| | 24 | Unsecured notes and loans payable to unrelated | ` <u> </u> | | 24 | |
| | 25 | Other liabilities (including federal income tax, par | · | | | *** :- |
| | | parties, and other liabilities not included on lines | | | | |
| | | Schedule D | | | 25 | |
| | 26 | Total liabilities. Add lines 17 through 25 | | 4,370,294. | 26 | 967,876. |
| | • | Organizations that follow SFAS 117 (ASC 958 | , check here X and | | | |
| S | | complete lines 27 through 29, and lines 33 an | d 34. | | | |
| nce | 27 | Unrestricted net assets | | 471,108,035. | 27 | 474,629,078. |
| <u>a</u> | 28 | Temporarily restricted net assets | | | 28 | |
| Ē | 29 | Permanently restricted net assets | | | 29 | |
| Ē | | Organizations that do not follow SFAS 117 (AS | SC 958), check here 🕨 🔲 | | | |
| ō | | and complete lines 30 through 34. | , | | | |
| et Assets or Fund Balances | 30 | Capital stock or trust principal, or current funds | ļ | | 30 | |
| | 31 | Paid-in or capital surplus, or land, building, or eq | · | | 31 | _ , |
| Ę | 32 | Retained earnings, endowment, accumulated inc | come, or other funds | , | 32 | |

475,596,954. Form **990** (2018)

474,629,078.

33

Total net assets or fund balances

Total liabilities and net assets/fund balances

471,108,035.

475,478,329.

| Form | 1 990 (2018) THE GOLDMAN SACHS CHARITABLE GIFT FUND | 11-38136 | 63 | Pag | ge 12 |
|------|--|-------------|-----|---------------|-------|
| Pai | rt XI Reconciliation of Net Assets | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XI | | | | |
| | | | | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | | ,688, | |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 157 | ,380, | 835. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | -3 | ,692, | 727. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 471 | ,108 <u>,</u> | 035. |
| 5 | Net unrealized gains (losses) on investments | 5 | 7 | ,213, | 770. |
| 6 | Donated services and use of facilities | 6 | | | |
| 7 | Investment expenses | 7 | | | |
| 8 | Prior period adjustments | 8 | | | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | _ | | 0. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, | | | | |
| | column (B)) | 10 | 474 | ,629, | 078. |
| Pai | rt XII Financial Statements and Reporting | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | X |
| | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990: Cash X Accrual Other | | | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule | • O. | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | | Х |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe | d on a | | | Ì |
| | separate basis, consolidated basis, or both | | | | 1 |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| b | Were the organization's financial statements audited by an independent accountant? | | 2b | X | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separar | te basis, | | | |
| | consolidated basis, or both | | | | 1 |
| | Separate basis X Consolidated basis Both consolidated and separate basis | | | | |
| c | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the | ne audit, | | | |
| | review, or compilation of its financial statements and selection of an independent accountant? | | 2c | | Х |
| | If the organization changed either its oversight process or selection process during the tax year, explain in Sch | edule O. | | | |
| За | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si | | | | |
| | Act and OMB Circular A-133? | - | 3a | | x |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ | iired audit | | | |
| | or audits, explain why in Schedule O and describe any steps taken to undergo such audits | | 36 | | |

Form **990** (2018)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information. OMB No 1545-0047

Open to Public

Inspection

| Nan | e of t | he organization | CO to www.mongo. | TOTAL CONTROL OF THE | | | | Employer | identification number | | |
|-----|---|--|-------------------------|---|-------------------------------------|-----------------|---------------------------------|---------------|---|--|--|
| | | - | LDMAN SACHS CHA | RITABLE GIFT FUND | 11-3813663 | | | | | | |
| Pa | rt I | Reason for Public C | | | mplete thi | s part.) Se | e instructions | S. | | | |
| The | organi | zation is not a private found | | | | | | | | | |
| 1 | | A church, convention of chi | | | | | NANG). | \sim | 7 | | |
| 2 | Ħ | A school described in secti | | | | | 70-70-7- | () | (| | |
| 3 | Ħ | A hospital or a cooperative | | • | | | i) | | • | | |
| 4 | 罟 | A medical research organization | | | | | | Viii) Enter | the hospital's name. | | |
| * | ш | | ation operated in cor | njanotion with a noopitar | 200011000 | 50040 | (2) | Дину. Сило. | and morphics of the many | | |
| - | | city, and state | or the henefit of a col | llege or university owned | or operate | ed by a go | vernmental u | nit describe | ad in | | |
| 5 | An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) | | | | | | | | | | |
| _ | | | | rontal cont decembed in | | /0/L\/4\/A\/ | 6.4 | | | | |
| 6 | X | A federal, state, or local gov | | | | | | a gonoral r | sublic described in | | |
| 7 | | An organization that normal | | ntial part of its support in | om a gove | mmeman | uriit or irom ti | ie general p | Jublic described in | | |
| _ | | section 170(b)(1)(A)(vi). (C | | (4)(A)(-i) (Complete Dort | 11.5 | | | | | | |
| 8 | 믬 | A community trust describe | | | | | | | | | |
| 9 | ш | An agricultural research org | | | • | | | | | | |
| | | or university or a non-land-g | rant college of agric | ulture (see instructions). | Enter the i | name, city, | , and state of | the college | or | | |
| | | university. | 0 /45 | H 00 4 (00/ -f-t | | | | | d | | |
| 10 | ш | An organization that normal | • | | | | | | | | |
| | | activities related to its exem | • | • | ` ' | | | • • | - | | |
| | | income and unrelated busin | | (less section 511 tax) iro | m busines | sses acquii | red by the org | janization a | inter June 30, 1973. | | |
| 11 | | See section 509(a)(2). (Cor An organization organized a | • | walv to test for public saf | ety See i | caction 50 | 10/21/41 | | | | |
| 12 | H | An organization organized a | • | • | - | | | m, out the | nurnoses of one or | | |
| 12 | | more publicly supported or | | | | | | | | | |
| | | lines 12a through 12d that | | | | | | | on our and box ar | | |
| а | | Type I. A supporting orga | | | | | | - | aivina | | |
| a | _ | the supported organization | • | • | | _ | | | | | |
| | | organization. You must o | | | , 5, 5 | | | | -F9 | | |
| ь | | Type II. A supporting org | • | | on with its | s supporte | d organizatio | n(s), by hav | rina | | |
| _ | | control or management of | , | | | • • | - | | = | | |
| | | organization(s). You mus | | | | | | J | | | |
| С | | Type III functionally inte | • | | n connect | tion with, a | and functiona | ly integrate | d with, | | |
| | | its supported organization | • | | | | | | | | |
| d | | Type III non-functionally | integrated. A supp | orting organization opera | ated in coi | nnection w | th its suppo | ted organiz | zation(s) | | |
| | | that is not functionally int | egrated. The organiz | zation generally must sati | sfy a distr | bution req | uirement and | l an attentiv | veness | | |
| | | requirement (see instructi | ons). You must cor | mplete Part IV, Sections | A and D, | and Part | V. | | | | |
| е | | Check this box if the orga | anization received a | written determination from | n the IRS | that it is a | Type I, Type | II, Type III | | | |
| | | functionally integrated, or | Type III non-function | nally integrated supportin | ng organiz | ation. | | | | | |
| f | Ente | r the number of supported o | organizations | | | | | | | | |
| g | | ride the following information | | | (iii) to the oron | eizelion linted | | | T | | |
| | (| i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1-10 | (iv) Is the orga in your governi | | (v) Amount o support (see ii | - | (vi) Amount of other support (see instructions) | | |
| | | Organization | | above (see instructions)) | Yes | No | support (see i | istructions) | support (see matructions) | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
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Total

Schedule A (Form 990 or 990-EZ) 2018 THE GOLDMAN SACHS CHARITABLE GIFT FUND 11-381366 Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

| Section A. Public Support | | | | | | | | |
|---------------------------|---|-----------------------|---------------------|---|---------------------|----------------------|--------------|--|
| Cale | ndar year (or fiscal year beginning in) | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total | |
| | Gifts, grants, contributions, and | | | | | | | |
| | membership fees received. (Do not | | | | | | | |
| | include any "unusual grants.") | 159,645,857. | 137,315,292. | 184,310,870. | 158,774,595. | 141,208,762. | 781,255,376. | |
| 2 | Tax revenues levied for the organ- | | | | | | | |
| | ızatıon's benefit and either paid to | | | | | | | |
| | or expended on its behalf | | | | | | | |
| 3 | The value of services or facilities | | _ | | | | | |
| | furnished by a governmental unit to | | | | | | | |
| | the organization without charge | | | | | | | |
| 4 | Total. Add lines 1 through 3 | 159,645,857. | 137,315,292. | 184,310,870. | 158,774,595. | 141,208,762. | 781,255,376. | |
| 5 | The portion of total contributions | | | | | | | |
| | by each person (other than a | | | | | | | |
| | governmental unit or publicly | | : | | | | | |
| | supported organization) included | | | | | | | |
| | on line 1 that exceeds 2% of the | | | | | | | |
| | amount shown on line 11, | | | | | | | |
| | column (f) | | | | | | 532,665,177. | |
| 6 | Public support. Subtract line 5 from line 4 | | | | | | 248,590,199. | |
| | ction B. Total Support | | | | | | | |
| Cale | ndar year (or fiscal year beginning in) | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total | |
| | Amounts from line 4 | 159,645,857. | 137,315,292. | 184,310,870. | 158,774,595. | 141,208,762. | 781,255,376. | |
| 8 | Gross income from interest, | | | | | | | |
| | dividends, payments received on | | | : | |) | | |
| | securities loans, rents, royalties, | 1 | | , | | | | |
| | and income from similar sources | 3,643,455. | 4,600,807. | 5,302,658. | 6,990,657. | 9,787,810. | 30,325,387. | |
| 9 | Net income from unrelated business | | | | | | • | |
| | activities, whether or not the | | | | | | | |
| | business is regularly carned on | | | | | | | |
| 10 | Other income. Do not include gain | | | | | | | |
| - | or loss from the sale of capital | | | | | | | |
| | assets (Explain in Part VI) | | | | | | | |
| 11 | Total support. Add lines 7 through 10 | | | | | | 811,580,763. | |
| | Gross receipts from related activities, | etc. (see instruction | ons) | | - | 12 | • | |
| | First five years. If the Form 990 is for | • | , | d, fourth, or fifth ta | x year as a section | | | |
| | organization, check this box and stor | here | | , | • | .,, | ▶□ | |
| Sec | ction C. Computation of Publi | c Support Per | centage | | | | | |
| 14 | Public support percentage for 2018 (li | ne 6, column (f) di | vided by line 11, c | olumn (f)) | | 14 | 30.63 % | |
| | Public support percentage from 2017 | | • | | | 15 | 29.35 % | |
| | 33 1/3% support test - 2018. If the c | | | n line 13, and line 1 | 14 is 33 1/3% or m | ore, check this box | and | |
| | stop here. The organization qualifies | - | | | | | ightharpoons | |
| b | 33 1/3% support test - 2017. If the o | | • | ne 13 or 16a, and | line 15 is 33 1/3% | or more, check thi | s box | |
| | and stop here. The organization quali | - | | | | - | ▶□ | |
| 17a | 10% -facts-and-circumstances test | • | • | | 13, 16a, or 16b, a | and line 14 is 10% o | or more, | |
| | and if the organization meets the "fac- | - | | | | | | |
| | meets the "facts-and-circumstances" | | | = | | | ▶ X | |
| b | 10% -facts-and-circumstances test | - | • | | • | 7a, and line 15 is | | |
| _ | more, and if the organization meets th | _ | | | | • | | |
| | organization meets the "facts-and-circ | | | | • • | | ▶ □ | |
| 18 | Private foundation. If the organization | | - | <u>=</u> | | | | |
| | | | | | | edule A (Form 990 | *** | |
| | | | | | . 55116 | | ,, 10 i0 | |

Page 3

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016(d) 2017 (e) 2018 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Gross receipts from admissions. merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b 8 Public support. (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016(d) 2017 (e) 2018 (f) Total 9 Amounts from line 6 10a Gross income from interest. dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12 First five years. If the Form 990 s for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage % 15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 15 16 Public support percentage from 2017 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) 17 <u>%</u> Investment income percentage from 2017 Schedule A, Part III, line 17 18 % 19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33/1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

| | | | Yes | No |
|--------|--|-------------|-----|-----------|
| 1 | Are all of the organization's supported organizations listed by name in the organization's governing | | | |
| | documents? If "No," describe in Part VI how the supported organizations are designated. If designated by | | | |
| | class or purpose, describe the designation. If historic and continuing relationship, explain | 1 | | |
| 2 | Did the organization have any supported organization that does not have an IRS determination of status | | | |
| | under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported | | | <u> </u> |
| | organization was described in section 509(a)(1) or (2). | 2 | | |
| За | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer | | | |
| | (b) and (c) below | 3a | | |
| b | Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and | | | |
| | satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the | | | , |
| | organization made the determination. | 3b | | |
| С | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) | | | |
| | purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use | 3с | | |
| 4a | Was any supported organization not organized in the United States ("foreign supported organization")? If | | | |
| | "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below | 4a | | |
| b | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign | | | |
| | supported organization? If "Yes," describe in Part VI how the organization had such control and discretion | | | |
| | despite being controlled or supervised by or in connection with its supported organizations | 4b | L | |
| C | Did the organization support any foreign supported organization that does not have an IRS determination | | | |
| | under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used | | | |
| | to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) | | | |
| | purposes | 4c | | - |
| 5a | Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," | | | |
| | answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN | | | 1 |
| | numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action; | | | |
| | (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action | | | |
| | was accomplished (such as by amendment to the organizing document). | 5a | | |
| Ь | Type I or Type II only. Was any added or substituted supported organization part of a class already | | — | |
| _ | designated in the organization's organizing document? | 5b | | |
| с 6 | Substitutions only. Was the substitution the result of an event beyond the organization's control? | 5c | | |
| 0 | Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class | | | |
| | benefited by one or more of its supported organizations, or (iii) other supporting organizations that also | | | |
| | support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in | | | 1 |
| | Part VI. | | | |
| 7 | Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor | | | |
| - | (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with | | | |
| | regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) | 7 | | |
| 8 | Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? | | | |
| | If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). | 8 | | |
| 9a | Was the organization controlled directly or indirectly at any time during the tax year by one or more | | | |
| | disqualified persons as defined in section 4946 (other than foundation managers and organizations described | | | |
| | ın section 509(a)(1) or (2))? If "Yes," provide detail in Part VI. | 9a | | |
| þ | Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which | | | 1 |
| | the supporting organization had an interest? If "Yes," provide detail in Part VI. | 9b | | |
| C | Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit | | | لــــا |
| | from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI. | 9c | | |
| 10a | Was the organization subject to the excess business holdings rules of section 4943 because of section | | | |
| | 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated | | | |
| | supporting organizations)? If "Yes," answer 10b below. | 10a | | |
| b | Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to | | | |
| | determine whether the organization had excess business holdings.) | 10b | | |

| Sche | dule A (Form 990 or 990-EZ) 2018 THE GOLDMAN SACHS CHARITABLE GIFT FUND | 11-3813663 | P: | age 5 |
|------|--|--------------------|------------|------------|
| Par | t IV Supporting Organizations (continued) | | | <u> </u> |
| | | | Yes | No |
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | | | |
| а | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) | | | |
| | below, the governing body of a supported organization? | 11a | | |
| b | A family member of a person described in (a) above? | 11b | ļ | |
| | A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a. b. or c. provide detail in Part VI. | 11c | | |
| Sec | tion B. Type I Supporting Organizations | | 1 | 1 |
| | | | Yes | No |
| 1 | Did the directors, trustees, or membership of one or more supported organizations have the power to | | 1 | |
| | regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the | | | |
| | tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or | | | |
| | controlled the organization's activities. If the organization had more than one supported organization, | | | |
| | describe how the powers to appoint and/or remove directors or trustees were allocated among the supported | <u>-</u> - | | |
| _ | organizations and what conditions or restrictions, if any, applied to such powers during the tax year. | 11 | - | - |
| 2 | Did the organization operate for the benefit of any supported organization other than the supported | | | |
| | organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in | | | |
| | Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, | | | |
| 800 | supervised, or controlled the supporting organization. | 2 | | <u> </u> |
| Sec | tion C. Type II Supporting Organizations | | V | Na |
| | More a majority of the arganization's dispotant or triptons dispine the tay year also a majority of the dispotant | | Yes | No |
| 1 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control | | | |
| | | | | |
| | or management of the supporting organization was vested in the same persons that controlled or managed | | | |
| Sec | the supported organization(s). tion D. All Type III Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the | | 1.00 | -114 |
| | organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax | | | |
| | year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the | | | |
| | organization's governing documents in effect on the date of notification, to the extent not previously provided? | 1 | | |
| 2 | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported | | | |
| | organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how | <u> </u> | l | |
| | the organization maintained a close and continuous working relationship with the supported organization(s). | 2 | | |
| 3 | By reason of the relationship described in (2), did the organization's supported organizations have a | | | |
| | significant voice in the organization's investment policies and in directing the use of the organization's | | ' | 1 |
| | income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's | | | |
| | supported organizations played in this regard. | 3 | | |
| Sec | tion E. Type III Functionally Integrated Supporting Organizations | | | |
| 1 | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see insti | ructions). | | |
| а | The organization satisfied the Activities Test. Complete line 2 below | | | |
| b | The organization is the parent of each of its supported organizations. Complete line 3 below | | | |
| С | The organization supported a governmental entity. Describe in Part VI how you supported a government entity | (see instructions, | | r |
| 2 | Activities Test. Answer (a) and (b) below. | | Yes | No |
| а | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of | | | |
| | the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify | ļ | | ŀ |
| | those supported organizations and explain how these activities directly furthered their exempt purposes, | | | |
| | how the organization was responsive to those supported organizations, and how the organization determined | | — | |
| | that these activities constituted substantially all of its activities. | 2a | ├ | <u> </u> |
| b | Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more | | | |
| | of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the | | | l |
| | reasons for the organization's position that its supported organization(s) would have engaged in these | | <u> </u> | |
| _ | activities but for the organization's involvement | <u>2b</u> | - | ├ |
| 3 | Parent of Supported Organizations. Answer (a) and (b) below. | | | |
| а | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or | | | - |
| _ | trustees of each of the supported organizations? Provide details in Part VI. | <u>3a</u> | \vdash | _ |
| b | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each | · | | <u> </u> |
| | of its supported organizations? If "Yes " describe in Part VI the role played by the organization in this regard | 3b | 1 | I |

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| Pa | rt V Type III Non-Functionally Integrated 509(a)(3) Supporting | ng Organi | zations | |
|------|---|----------------|----------------------------|--------------------------------|
| 1 | Check here if the organization satisfied the Integral Part Test as a qualifying | ng trust on N | ov. 20, 1970 (explain in F | Part VI.) See instructions. A |
| | other Type III non-functionally integrated supporting organizations must co | omplete Sec | tions A through E. | |
| Sect | ion A - Adjusted Net Income | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Net short-term capital gain | 1 | | |
| 2 | Recoveries of prior-year distributions | 2 | | |
| 3 | Other gross income (see instructions) | 3 | | |
| 4 | Add lines 1 through 3 | 4 | | |
| 5 | Depreciation and depletion | 5 | | |
| 6 | Portion of operating expenses paid or incurred for production or | | - | |
| | collection of gross income or for management, conservation, or | | | |
| | maintenance of property held for production of income (see instructions) | 6 | | |
| 7 | | 7 | | |
| 8 | Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) | 8 | | |
| Sect | ion B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Aggregate fair market value of all non-exempt-use assets (see | | | |
| | instructions for short tax year or assets held for part of year) | | | |
| а | Average monthly value of securities | 1a | | |
| b | Average monthly cash balances | 1b | | |
| С | Fair market value of other non-exempt-use assets | 1c | | *** |
| d | Total (add lines 1a, 1b, and 1c) | 1d | | • |
| е | Discount claimed for blockage or other | | | |
| | factors (explain in detail in Part VI): | : | | |
| 2 | Acquisition indebtedness applicable to non-exempt-use assets | 2 | | |
| 3 | Subtract line 2 from line 1d | 3 | | |
| 4 | Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, | | | |
| | see instructions) | 4 | | |
| 5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | | |
| 6 | Multiply line 5 by 035 | 6 | | |
| 7 | Recoveries of prior-year distributions | 7 | | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | | |
| Sect | ion C - Distributable Amount | | | Current Year |
| 1 | Adjusted net income for prior year (from Section A, line 8, Column A) | 1 | | |
| 2 | Enter 85% of line 1 | 2 | | |
| 3_ | Minimum asset amount for prior year (from Section B, line 8, Column A) | 3 | | |
| 4 | Enter greater of line 2 or line 3 | 4 | | |
| 5 | Income tax imposed in prior year | 5 | | |
| 6 | Distributable Amount. Subtract line 5 from line 4, unless subject to | | | |
| | emergency temporary reduction (see instructions) | 6 | | <u> </u> |
| 7 | Check here if the current year is the organization's first as a non-functional | lly integrated | Type III supporting orga | inization (see |
| | instructions) | - | 5 5 | • |

Schedule A (Form 990 or 990-EZ) 2018

| E | GOLDMAN | SACHS | CHARITABLE | GIFT | FUND | _ | 11-3813663 | Page 7 |
|---|---------|-------|------------|------|------|---|------------|--------|

| Sche | edule A (Form 990 or 990-EZ) 2018 THE GOLDMAN SACHS | 11-3813663 | Page 7 | | |
|--------------|---|--------------------------------|--|-----------------------------------|---|
| Par | | | | | |
| Secti | ion D - Distributions | Current Year | | | |
| 1_ | Amounts paid to supported organizations to accomplish ex | empt purposes | | | |
| 2 | Amounts paid to perform activity that directly furthers exem | | | | |
| | organizations, in excess of income from activity | | | | |
| 3 | Administrative expenses paid to accomplish exempt purpos | ses of supported organizations | 3 | | |
| 4 | Amounts paid to acquire exempt-use assets | | | | |
| 5 | Qualified set-aside amounts (prior IRS approval required) | | | | |
| 6 | Other distributions (describe in Part VI) See instructions. | | | | |
| 7 | Total annual distributions. Add lines 1 through 6. | | | | |
| 8 | Distributions to attentive supported organizations to which | the organization is responsive | - " | | |
| | (provide details in Part VI). See instructions. | | | | |
| 9 | Distributable amount for 2018 from Section C, line 6 | | | | |
| 10 | Line 8 amount divided by line 9 amount | | | | |
| Secti | ion E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions Pre-2018 | (iii) Distributa Amount for | |
| _1_ | Distributable amount for 2018 from Section C, line 6 | | | | |
| 2 | Underdistributions, if any, for years prior to 2018 (reason- | | | T | |
| | able cause required- explain in Part VI). See instructions. | | | | |
| _3_ | Excess distributions carryover, if any, to 2018 | <u> </u> | | | |
| <u>a</u> | From 2013 | | ` | | |
| <u>b</u> | From 2014 | | | | |
| С_ | From 2015 | | | | j |
| <u>d</u> | From 2016 | | | | |
| е | From 2017 | | | | |
| f | Total of lines 3a through e | | | | |
| g | Applied to underdistributions of prior years | <u> </u> | | | |
| <u>h</u> | Applied to 2018 distributable amount | | | | |
| i_ | Carryover from 2013 not applied (see instructions) | | | | |
| _ <u>i</u> _ | Remainder. Subtract lines 3g, 3h, and 3i from 3f | | | | |
| 4 | Distributions for 2018 from Section D, | | | | |
| | line 7: \$ | | | | |
| <u>a</u> | Applied to underdistributions of prior years | | | | i |
| b | Applied to 2018 distributable amount | | | | |
| С | Remainder. Subtract lines 4a and 4b from 4. | | | | |
| 5 | Remaining underdistributions for years prior to 2018, if | | | | |
| | any. Subtract lines 3g and 4a from line 2. For result greater | | | | |
| | than zero, explain in Part VI. See instructions. | | | | |
| 6 | Remaining underdistributions for 2018. Subtract lines 3h | | | | |
| | and 4b from line 1. For result greater than zero, explain in | | | | |
| | Part VI. See instructions. | | | | |
| 7 | Excess distributions carryover to 2019. Add lines 3j | | | | |
| | and 4c. | | | | |
| | Breakdown of line 7 | | | | |
| a | Excess from 2014 | <u></u> | | | |
| <u>b</u> | Excess from 2015 | | · | ļ | |
| С | Excess from 2016 | | | | |
| d | Excess from 2017 | | | | 1 |

Schedule A (Form 990 or 990-EZ) 2018

e Excess from 2018

| Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1; Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) |
|---|
| PART II, SECTION C, LINE 17A, FACTS AND CIRCUMSTANCES TEST: |
| THE GOLDMAN SACHS CHARITABLE GIFT FUND ("GOLDMAN SACHS GIVES") SATISFIED |
| THE PUBLIC SUPPORT TEST FOR THE 2018 TAX YEAR. SPECIFICALLY, GOLDMAN SACHS |
| GIVES SATISFIED THE 10% FACTS AND CIRCUMSTANCES TEST SET FORTH IN TREASURY |
| REGULATIONS SECTION 1.170A 9(F)(3). |
| GOLDMAN SACHS GIVES RECEIVED 30.63% IN PUBLIC SUPPORT BASED ON SUPPORT |
| RECEIVED DURING THE 2014 - 2018 TAX YEARS AND IS ORGANIZED AND OPERATED TO |
| ATTRACT NEW AND ADDITIONAL SUPPORT ON A CONTINUOUS BASIS, AND HAS A |
| STATEGIC FUNDRAISING PLAN THAT IS INTENDED TO ATTRACT SUPPORT FROM THE |
| DONORS THAT IT TARGETS. |
| THROUGHOUT THIS TAX YEAR GOLDMAN SACHS GIVES MAINTAINED A CONTINUOUS AND ON-GOING BONA FIDE PROGRAM TO SOLICIT CONTRIBUTIONS FROM THE SENIOR |
| EMPLOYEES AND FORMER SENIOR EMPLOYEES OF GOLDMAN SACHS, INCLUDING ORAL AND |
| WRITTEN SOLICITATION OF GOLDMAN SACHS SENIOR EMPLOYEES AT SENIOR EMPLOYEES |
| PRESENTATIONS, DIRECT SOLICIATION EFFORTS TO ENCOURAGE CONTRIBUTIONS, AND |
| EMAILS PERIODICALLY ENCOURAGING CONTRIBUTIONS GENERALLY OR IN SUPPORT OF |
| SPECIFIC GOLDMAN SACHS GIVES CHARITABLE INITIATIVES. IN ADDITION, THIS |
| YEAR GOLDMAN SACHS GIVES DEVELOPED NEW MARKETING MATERIALS DISTRIBUTED AT |
| LARGE EVENTS INCLUDING RETIRED SENIOR EMPLOYEES TO ENCOURAGE NEW DONOR |
| PARTICIPATION AND DONATIONS FROM EXISTING DONORS. |
| |
| GOLDMAN SACHS GIVES EXTENDED ITS SOLICITATION EFFORTS TO NEW PROSPECTIVE |
| DONORS CONSISTING OF NEWLY NAMED US-BASED MANAGING DIRECTORS OF GOLDMAN |
| SACHS AND GS GIVES CONTINUED TO SOLICIT THE POPULATION THROUGH ORAL AND |
| |

| Schedule A (Form 990 or 990-EZ) 2018 THE GOLDMAN SACHS CHARITABLE GIFT FUND | 11-3813663 | Page 8 |
|--|---|---------------------------------------|
| Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 1 Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, line 1; Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any ad | nes 1 and 2; Part IV, Sectio Part V, Section B, line 1e, P | n C, |
| (See instructions.) | ditional information. | |
| | | |
| GOLDMAN SACHS GIVES HAS BEEN SUCCESSFUL IN RAISING FUNDS FROM ITS TARGETED | | |
| DONOR POOL, INCREASING ITS PUBLIC SUPPORT BY OVER 1 PERCENTAGE POINT TO | | |
| 30.63%. IN ADDITION, SUPPORT WAS WIDESPREAD WITH MORE THAN 115 DONORS | | |
| DURING THE 2018 TAX YEAR. | | |
| | | |
| IN TAX YEAR 2018, GOLDMAN SACHS GIVES PROVIDED GRANTS TO APPROXIMATELY | | |
| 2,900 CHARITIES TOTALING \$157 MILLION. | | |
| | <u> </u> | |
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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No 1545-0047

Name of the organization

THE GOLDMAN SACHS CHARITABLE GIFT FUND

Employer identification number 11-3813663

| Pai | t I Organizations Maintaining Donor Advised | | Accounts. Complete if the | | | | | |
|-------------------|---|--|---|--|--|--|--|--|
| | organization answered "Yes" on Form 990, Part IV, line | | · | | | | | |
| | | (a) Donor advised funds | (b) Funds and other accounts | | | | | |
| 1 | Total number at end of year | 568 | | | | | | |
| 2 | Aggregate value of contributions to (during year) | 141,178,339. | | | | | | |
| 3 | Aggregate value of grants from (during year) | 156,630,416. | | | | | | |
| 4 | Aggregate value at end of year | 474,260,369. | | | | | | |
| 5 | Did the organization inform all donors and donor advisors in v | vriting that the assets held in donor advised | funds | | | | | |
| | are the organization's property, subject to the organization's | | X Yes No | | | | | |
| 6 | Did the organization inform all grantees, donors, and donor ad | | | | | | | |
| · | for charitable purposes and not for the benefit of the donor or | | | | | | | |
| | impermissible private benefit? | construction and construction perspectation | X Yes No | | | | | |
| Pai | t II Conservation Easements. Complete if the org | anization answered "Yes" on Form 990, Par | | | | | | |
| <u> </u> | Purpose(s) of conservation easements held by the organization | | · | | | | | |
| • | Preservation of land for public use (e.g., recreation or ed | | cally important land area | | | | | |
| | Protection of natural habitat | Preservation of a certifie | | | | | | |
| | Preservation of open space | | | | | | | |
| 2 | Complete lines 2a through 2d if the organization held a qualifi | ed conservation contribution in the form of | a conservation easement on the last | | | | | |
| | day of the tax year. | | Held at the End of the Tax Year | | | | | |
| а | Total number of conservation easements | | 2a | | | | | |
| b | Total acreage restricted by conservation easements | | 2b | | | | | |
| С | Number of conservation easements on a certified historic stru | icture included in (a) | 2c | | | | | |
| d | Number of conservation easements included in (c) acquired a | fter 7/25/06, and not on a historic structure | | | | | | |
| | listed in the National Register | | 2d | | | | | |
| 3 | Number of conservation easements modified, transferred, rele | eased, extinguished, or terminated by the or | ganization during the tax | | | | | |
| | year ▶ | | | | | | | |
| 4 | Number of states where property subject to conservation eas | ement is located > | | | | | | |
| 5 | | | | | | | | |
| | violations, and enforcement of the conservation easements it | holds? | Yes No | | | | | |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, | handling of violations, and enforcing conserv | vation easements during the year | | | | | |
| | | | | | | | | |
| 7 | Amount of expenses incurred in monitoring, inspecting, hand | ling of violations, and enforcing conservation | n easements during the year | | | | | |
| | ▶ \$ | | | | | | | |
| 8 | Does each conservation easement reported on line 2(d) above | e satisfy the requirements of section 170(h)(4 | 4)(B)(ı) | | | | | |
| | and section 170(h)(4)(B)(ii)? | | Yes No | | | | | |
| 9 | In Part XIII, describe how the organization reports conservation | on easements in its revenue and expense sta | atement, and balance sheet, and | | | | | |
| | include, if applicable, the text of the footnote to the organization | ion's financial statements that describes the | organization's accounting for | | | | | |
| Г Б- - | conservation easements. | And Historical Transcriptor an Other | - Circilar A a a ba | | | | | |
| Pai | Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. | | | | | | | |
| | Complete if the organization answered "Yes" on Form | | | | | | | |
| 1a | If the organization elected, as permitted under SFAS 116 (AS | | · | | | | | |
| | historical treasures, or other similar assets held for public exh | • | e of public service, provide, in Part XIII, | | | | | |
| | the text of the footnote to its financial statements that describ | | | | | | | |
| b | If the organization elected, as permitted under SFAS 116 (AS | | | | | | | |
| | treasures, or other similar assets held for public exhibition, ed | lucation, or research in furtherance of public | service, provide the following amounts | | | | | |
| | relating to these items: | | . . | | | | | |
| | (i) Revenue included on Form 990, Part VIII, line 1 | | S | | | | | |
| _ | (ii) Assets included in Form 990, Part X | | \$ | | | | | |
| 2 | If the organization received or held works of art, historical trea | • | ain, provide | | | | | |
| | the following amounts required to be reported under SFAS 11 | ib (ASC 958) relating to these items | . . | | | | | |
| а | Revenue included on Form 990, Part VIII, line 1 | | 5 | | | | | |
| <u>b</u> | Assets included in Form 990, Part X | | <u> </u> | | | | | |

832051 10-29-18

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2018

| | | N SACHS CHARITA | BLE GIE | T FUND | | | | 11-381 | 3663 | Page 2 |
|--------------|---|-------------------------|--|----------------|---------------------|-----------|----------------|--------------|--------------|------------|
| Pa | t III Organizations Maintaining C | ollections of Ar | t, Histo | orical Tre | easures, or Ot | her S | imila | r Assets | (contin | ued) |
| 3 | 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items | | | | | | | | | |
| | (check all that apply): | | | | | | | | | |
| а | Public exhibition | | d 🗀 1 | Loan or exc | hange programs | | | | | |
| b | Scholarly research | • | e 🗀 (| Other | . <u>.</u> | | | | | |
| С | Preservation for future generations | | | | | | | | | |
| 4 | Provide a description of the organization's co | ollections and explai | n how th | ey further th | ne organization's e | xempt | purpo | se in Part | XIII. | |
| 5 | During the year, did the organization solicit of | r receive donations | of art, his | storical treas | sures, or other sim | ıılar ası | sets | | _ | |
| | to be sold to raise funds rather than to be ma | | | | | _ | | | Yes | No |
| Pai | t IV Escrow and Custodial Arran | • | ete ıf the | organizatio | on answered "Yes" | on Fo | rm 990 | , Part IV, I | ıne 9, or | |
| | reported an amount on Form 990, Pa | rt X, line 21. | | | | | | | _ | |
| 1a | Is the organization an agent, trustee, custodi | an or other intermed | diary for c | contribution | s or other assets r | not incl | uded | | _ | |
| | on Form 990, Part X? | | | | | | | | Yes | L No |
| b | If "Yes," explain the arrangement in Part XIII | and complete the fo | llowing to | able | | | | | | |
| | | | | | | | \vdash | | Amount | |
| | Beginning balance | | | | | | 1c | | | |
| d | Additions during the year | | | | | | 1d | | | |
| е | Distributions during the year | | | | | | 1e | | | |
| f | Ending balance | | | | | | 1f | | _ | |
| | Did the organization include an amount on F | | | | | • | | | Yes | ∐ No |
| | If "Yes," explain the arrangement in Part XIII. | | | | | | - | | | |
| Par | t V Endowment Funds. Complete | | | | 1 | | - , | | | |
| | | (a) Current year | (b) P | nor year | (c) Two years bac | k (d) | Three y | ears back | (e) Four | years back |
| 1a | Beginning of year balance | | | | | + | | | | |
| b | Contributions | | | | | - | | | | |
| C | Net investment earnings, gains, and losses | | - | | | + | | | | |
| a | Grants or scholarships | | | | - | | | | | |
| е | Other expenditures for facilities | |] | | | | | | | |
| | and programs | | | | - | + | | | | |
| 1 | Administrative expenses | | | | | + | | | | |
| g | End of year balance Provide the estimated percentage of the curr | ant voor and halana | | . oolumn (o | l hold oo: | | | | | |
| 2 | Board designated or quasi-endowment | ent year end balanc | e (iirie ig % | i, column (a |)) neid as | | | | | |
| a b | Permanent endowment | % | — ⁷⁶ | | | | | | | |
| | Temporarily restricted endowment | ^ | | | | | | | | |
| · | The percentages on lines 2a, 2b, and 2c short | | | | | | | • | | |
| 3a | Are there endowment funds not in the posse | • | ation that | are held ar | nd administered fo | r the o | rnaniza | ation | | |
| - | by. | colori or allo organiza | 20011 11101 | aro ricio ai | ia administered to | | gainze | 4000 | ٦ | Yes No |
| | (i) unrelated organizations | | | | | | | | 3a(i) | 105 100 |
| | (ii) related organizations | | | | | | | | 3a(ii) | |
| ь | If "Yes" on line 3a(ii), are the related organiza | tions listed as requi | red on So | chedule R? | | | | | 3b | |
| 4 | Describe in Part XIII the intended uses of the | • | | | | | | | | |
| Par | | | | | | | | | | |
| | Complete if the organization answered | d "Yes" on Form 990 |), Part IV | , line 11a. S | ee Form 990, Part | X, line | 10. | | | |
| | Description of property | (a) Cost or o | | | I ' | | mulate | ed | (d) Book | value |
| | | basis (investr | ment) | basis | (other) | depre | ciation | | | |
| 1a | Land | | | | | | | | | |
| b | Buildings | | | | | | | | | |
| С | Leasehold improvements | | | | | | | | | |
| d | Equipment | | | | | | | | | |
| <u>e</u> | Other | | | | | | | | | |
| <u>Total</u> | Add lines 1a through 1e. (Column (d) must e | gual Form 990. Part | X. colum | n (B). line 1 | 0c.) | | | | | 0. |

Schedule D (Form 990) 2018

THE GOLDMAN SACHS CHARITABLE GIFT FUND

| Part VII | Investments - Other Securities. | on Form 990 Part IV | line 11h See Form 990 | Part V. lina 12 | |
|-------------|--|-----------------------|---------------------------------------|---------------------------------------|---------------------------------------|
| (a) Descrip | Complete if the organization answered "Yes" of tion of security or category (including name of security) | (b) Book value | | | d-of-year market value |
| | al derivatives | (5) 5001. 10.00 | (o) monitor of | | |
| | held equity interests | | | | |
| (3) Other | noid equity interests | | | | |
| (A) | | | | | |
| (B) | | | | | |
| (C) | | | | | |
| (D) | | | | | |
| (E) | | | | | <u> </u> |
| (F) | | | - | | |
| (G) | | - | - | | |
| (H) | - | | | | |
| | o) must equal Form 990, Part X, col. (B) line 12.) | | | | · · · · · · · · · · · · · · · · · · · |
| | Investments - Program Related. | | | • | · · · · · · · · · · · · · · · · · · · |
| | Complete if the organization answered "Yes" of | on Form 990. Part IV | line 11c. See Form 990 | Part X line 13 | |
| | (a) Description of investment | (b) Book value | | | d-of-year market value |
| (1) | | <u></u> ` | | <u>-</u> | <u> </u> |
| (2) | | | <u> </u> | | |
| (3) | | | | | |
| (4) | | | | · · · · · · · · · · · · · · · · · · · | |
| (5) | | | | | |
| (6) | | | | | |
| (7) | | | | | |
| (8) | | | | | |
| (9) | | | | | |
| | o) must equal Form 990, Part X, col. (B) line 13.) | | | | |
| Part IX | Other Assets. | • | | | |
| | Complete if the organization answered "Yes" of | on Form 990, Part IV. | line 11d. See Form 990. | Part X. line 15. | |
| | | Description | | , | (b) Book value |
| (1) | | | | | |
| (2) | | | | | |
| (3) | | | | | |
| (4) | | | | | |
| (5) | | | | | |
| (6) | | | | | |
| (7) | | | | | |
| (8) | | | | | |
| (9) | | | | | |
| | mn (b) must equal Form 990. Part X. col. (B) line | 15) | | • | |
| Part X | Other Liabilities. | | | | <u> </u> |
| | Complete if the organization answered "Yes" of | on Form 990, Part IV, | line 11e or 11f. See Fori | m 990, Part X, line 25 | |
| 1. | (a) Description of liability | | (b) Book value | | |
| (1) Fed | eral income taxes | , , , , , | ·- | 1 | |
| (2) | | | | 1 | |
| (3) | | | · · · · · · · · · · · · · · · · · · · | 1 | |
| (4) | | Ì | | 7 | |
| (5) | | İ | | 1 | |
| (6) | | | | 1 | |
| (7) | | | _ | 1 | |
| (8) | | | | 1 | |
| (9) | | | - | 1 | |
| | mn (b) must equal Form 990. Part X. col. (B) line | 25.) | | 7 | |

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

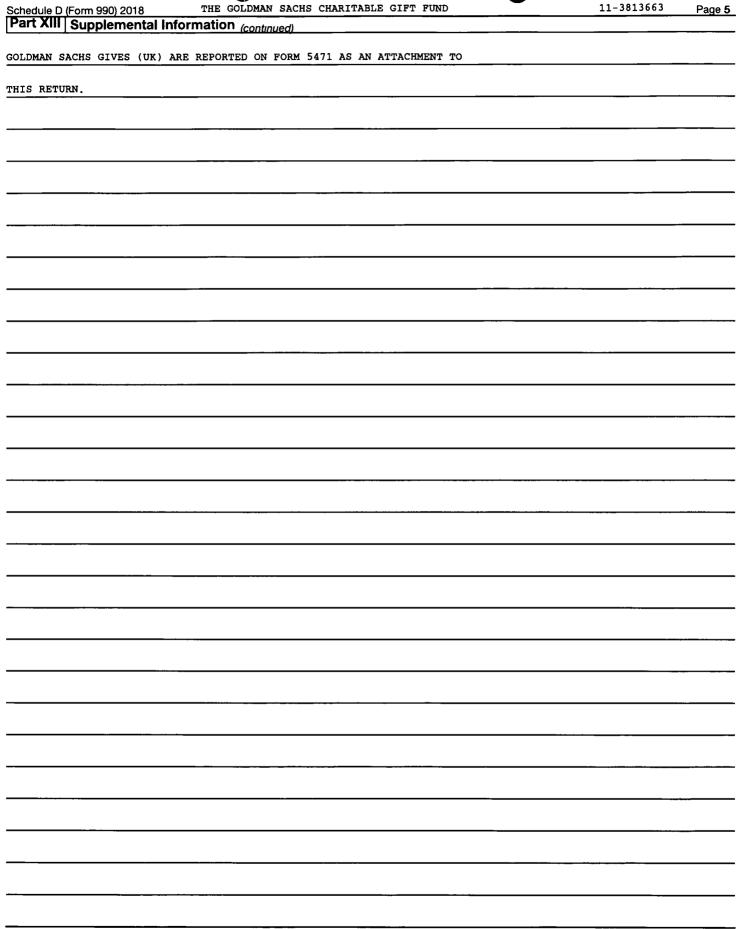
Schedule D (Form 990) 2018

Page 4

| Га | Complete if the executation applicated "Vee" on Form 900 Part IV line 12a | | tevenue per me | tarr. | |
|-------|---|------------|--|--|---------------------|
| 1 | Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total revenue, gains, and other support per audited financial statements | | | | 187,031,301. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12 | | | - | |
| a | Net unrealized gains (losses) on investments | 2a | 7,213,770. | | |
| h | Donated services and use of facilities | 2b | 2,363,213. | 1 | |
| c | Recoveries of prior year grants | 2c | · | 1 | |
| d | Other (Describe in Part XIII.) | 2d | 23,766,210. | 1 | |
| e | ALLE ALLE ALLE ALLE ALLE ALLE ALLE ALLE | | | 2e | 33,343,193. |
| 3 | Subtract line 2e from line 1 | | | 3 | 153,688,108. |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1 | | | | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | | |
| b | Other (Describe in Part XIII.) | 4b | |] | |
| С | Add lines 4a and 4b | | | 4c | 0. |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) | | | 5 | 153,688,108. |
| Pa | rt XII Reconciliation of Expenses per Audited Financial Statem | ents With | Expenses per F | Return. | |
| | Complete if the organization answered "Yes" on Form 990, Part IV, line 12a | l . | | | |
| 1 | Total expenses and losses per audited financial statements | | | 1 | 193,987,455. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25. | 1 1 | | | |
| а | Donated services and use of facilities | 2a | 2,363,213. | | |
| b | Prior year adjustments | 2b | | ! | |
| C | Other losses | 2c | 34 343 407 | 1 | |
| d | Other (Describe in Part XIII.) | 2d | 34,243,407. | | 36,606,620. |
| e | Add lines 2a through 2d | | | 2e | 157,380,835. |
| 3 | Subtract line 2e from line 1 | | | 3 | 137,300,033. |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1 | امدا | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) | 4a 4b | | 1 | |
| b | Add lines 4a and 4b | 40 | | 4c | 0. |
| 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | | | 5 | 157,380,835. |
| | rt XIII Supplemental Information. | | • | | , , , |
| | ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any add | | | -, Part X, I | me 2, Part XI, |
| | YX, LINE 2: | | | | |
| THE | GOLDMAN SACHS CHARITABLE GIFT FUND ("GOLDMAN SACHS GIVES") IS | EXEMPT | | | |
| FROM | FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL R | EVENUE | | | |
| CODE | . THE GOLDMAN SACHS CHARITABLE GIFT FUND (UK) IS A DISREGARDE | D ENTITY | | | ·· <u>·</u> ···· |
| AND | THEREFORE ITS ACTIVITIES ARE CONSOLIDATED WITH GOLDMAN SACHS | GIVES FOR | | | |
| PEDI | RAL INCOME TAX REPORTING PURPOSES. GOLDMAN SACHS GIVES (UK) I | S A UK | | | |
| REG | STERED CHARITY. IT IS NOT A DISREGARDED ENTITY FOR US FEDERAL | INCOME | | | |
| | | | • | | , |
| IAA | PURPOSES. GOLDMAN SACHS CHARITABLE GIFT FUND (UK) AND GOLDMAN | SACHS | <u>. </u> | | - |
| GIVE | S (UK) ARE EACH SUBJECT TO SEPARATE UK TAX REPORTING REQUIREM | ENTS AS | | | · |
| REQU | VIRED BY HER MAJESTY'S REVENUE AND CUSTOMS. THE FUND HAS REVIE | WED ITS | | | |
| TAX | POSITIONS FOR ALL OPEN TAX YEARS (THE FISCAL YEAR ENDED JUNE | 30, 2019 | | | |
| AND | PRIOR THREE YEARS), AND HAS CONCLUDED THAT NO PROVISION FOR I | NCOME TAX | | | |
| 83205 | 4 10-29-18 | | | Schedul | e D (Form 990) 2018 |

16280310 756359 1622150.001

| Schedule D (Form 990) 2018 THE GOLDMAN SACHS CHARITABLE GIFT FUND | 11-3813663 | Page 5 |
|--|------------------|-------------|
| Part XIII Supplemental Information (continued) | | |
| IS REQUIRED IN THE FUND'S CONSOLIDATED FINANCIAL STATEMENTS. SUCH OPEN TAX | | |
| YEARS REMAIN SUBJECT TO EXAMINATION AND ADJUSTMENT BY TAX AUTHORITIES. | | |
| | | |
| PART XI, LINE 2D - OTHER ADJUSTMENTS: | | |
| ELIMINATION OF THE REVENUES OF GOLDMAN SACHS GIVES (UK) | | |
| | | |
| ("GSG UK") 23,766,210. | | |
| PART XII, LINE 2D - OTHER ADJUSTMENTS: | | |
| ELIMINATION OF THE EXPENSES OF GOLDMAN SACHS GIVES (UK) | | |
| ("GSG UK") 34,243,407. | | |
| | | |
| SCHEDULE D, PART XI, LINE 2D: | | |
| THE AMOUNT REPORTED REPRESENTS THE ELIMINATION OF THE REVENUES OF GOLDMAN | ···· | |
| SACHS GIVES (UK) ("GSG UK"). GSG UK IS INCLUDED IN THE AUDITED FINANCIAL | | |
| STATEMENTS OF THE GOLDMAN SACHS CHARITABLE GIFT FUND ("GOLDMAN SACHS | | |
| GIVES") BUT SHOULD NOT BE REPORTED ON THE GOLDMAN SACHS GIVES FORM 990. | | |
| IN ORDER FOR GOLDMAN SACHS GIVES TO RECONCILE THEIR REVENUES AS REPORTED | | |
| IN THEIR AUDITED FINANCIAL STATEMENT TO THE FORM 990, THE GSG UK REVENUES | | |
| FOR THE YEAR MUST BE ELIMINATED. THE ACTIVITIES OF GSG UK ARE REPORTED ON | | |
| FORM 5471 AS AN ATTACHMENT TO THE FORM 990. | | |
| | | |
| SCHEDULE D, PART XII, LINE 2D: | | |
| | | |
| THE ACTIVITY OF GOLDMAN SACHS GIVES (UK) IS INCLUDED IN THE GOLDMAN SACHS | | |
| CHARITABLE GIFT FUND AUDITED FINANCIAL STATEMENTS. THE ACTIVITIES OF | | |
| GOLDMAN SACHS GIVES (UK) ARE NOT REPORTED ON THE FORM 990 BECAUSE IT IS A | | |
| SEPARATE CHARITY ORGANIZED IN THE UNITED KINGDOM AND IS NOT CONSIDERED A | | |
| DISREGARDED ENTITY UNDER THE INTERNAL REVENUE CODE. THE ACTIVITIES OF | | |
| | Schedule D (Form | 990) 2018 |



SCHEDULE F (Form 990)

Statement of Activities Outside the United States

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

➤ Attach to Form 990.

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

2018
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

| THE GOLDMAN SACHS CHAR | | | - | | 11-3813663 | |
|---------------------------------|--|--|---|------------------|----------------------------------|-------------------------|
| | | ctivities Out | side the United States. Comple | ete if the organ | ization answered ' | 'Yes" on |
| Form 990, Part IV | | | 4. 4 | | | - |
| • | - | | ds to substantiate the amount of its gra- the selection criteria used to award the | | · - | Yes No |
| trie grantees engionity in | or the grants or a | assistance, and | the selection chiefla used to award the | grants or assis | starice. | _ 1es10 |
| 2 For grantmakers. Desc | ribe in Part V the | organization's | procedures for monitoring the use of its | grants and ot | her assistance out | side the |
| United States. | | | - | | | |
| 3 Activities per Region. (T | he following Part | I, line 3 table ca | n be duplicated if additional space is n | eeded.) | | |
| (a) Region | (b) Number of | (c) Number of | (d) Activities conducted in the region | | vity listed in (d) | (f) Total |
| | offices in the region | employees, agents, and independent | (by type) (such as, fundraising, program services, investments, grants to | • | gram service, e specific type | expenditures for and |
| | in the region | contractors | recipients located in the region) | | (s) in the region | investments |
| | | in the region | • | | (0) | in the region |
| | | | | | | |
| EUROPE (INCLUDING | | | , | | | 1 |
| ICELAND & GREENLAND) | 1 | | GRANTMAKING | • | | 2,358,200. |
| | | | | - | | |
| • | | | | | | |
| EAST ASIA AND THE | | | | | | |
| PACIFIC | 1 | | GRANTMAKING | | | 1,772,930. |
| | | | | | | |
| | | | | | | |
| NORTH AMERICA | | | GRANTMAKING | | | 817,055. |
| | | | | | | 1, |
| | | | | | | |
| | | | | | | |
| SOUTH ASIA | | | GRANTMAKING | | | 188,666. |
| ī | 1 | | | | | |
| MIDDLE EAST AND | | | | | | |
| MIDDLE EAST AND NORTH AFRICA | | | GRANTMAKING | | | 75 000 |
| HORITA AFRICA | | | PLANTING | | | 75,000. |
| | | | | | | |

GRANTMAKING

GRANTMAKING

INVESTMENTS

0

0

0

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2018

11,000.

5,000.

265,792,871.

271,020,722.

15,619,005.

286,639,727.

SOUTH AMERICA

SUB-SAHARAN AFRICA

EUROPE (INCLUDING ICELAND & GREENLAND)

b Total from continuation

sheets to Part I

c Totals (add lines 3a and 3b)

3 a Subtotal

| Schedule F (Form 990) | | | ABLE GIFT FUND | 11-3813663 | Page |
|---------------------------------|---|--|---|--|--|
| Part I Continuation | on of Activitie | s per Regior | - (Schedule F (Form 990), Part I, line 3) | | |
| (a) Region | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region | (f) Total expenditure for region |
| | | | | | |
| NORTH AMERICA | | | INVESTMENTS | | 7,223,673 |
| EAST ASIA AND THE | | | TANTEGOMENING | | 6 500 25/ |
| PACIFIC | | | INVESTMENTS | | 6,588,254 |
| CENTRAL AMERICA AND | | | INVESTMENTS | | 1,807,078 |
| | | | | | |
| MIDDLE EAST AND NORTH AFRICA | | | INVESTMENTS | | 0 |
| | | | | | |
| SOUTH AMERICA | | | INVESTMENTS | | 0 |
| | | | | | |
| - | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | • |
| • | | , | | | |
| | | | | - | |
| | | | | | |
| | | | | | |
| Totals | <u>· l</u> | | | | 15,619,005 |

Schedule F (Form 990) 2018

11-3813663

Page 2

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

| 1 (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of noncash assistance | (h) Description of noncash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|----------------------------|--|--|----------------------|-----------------------------|---------------------------------|----------------------------------|---------------------------------------|---|
| | | EAST ASIA AND PACIFIC | CHARITABLE PROJECT | 300,000. CHECK | ЭНЕСК | .0 | | |
| | | EAST ASIA AND PACIFIC | CHARITABLE PROJECT | 210,000. | WIRE | 0 | | |
| | | NORTH AMERICA | CHARITABLE PROJECT | 209,000.WIRE | #IRE | 0 | | |
| | | NORTH AMERICA | CHARITABLE PROJECT | 209,000 | CHECK | 0. | , | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 201,734. | WIRE | .0 | | |
| | : | EAST ASIA AND PACIFIC | CHARITABLE PROJECT | 190,700. | #IRE | 0 | | |
| | | EAST ASIA AND PACIFIC | CHARITABLE PROJECT | 165,000. | WIRE | 0 | | |
| | | EAST ASIA AND PACI?IC | CHARITABLE PROJECT | 150,000. WIRE | #IRE | 0. | | |

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Enter total number of other organizations or entities

0

Schedule F (Form 990) 2018

| Page 2 | (i) Method of valuation (book, FMV, appraisal, other) | | | | | | | |
|--|---|--|--|--------------------|--|--|--------------------|-------------------|
| | (i) N valuatio appre | | | | | | | |
| | (h) Description of non-cash assistance | | | | | | | |
| 3663 90) Part II line 1 | (g) Amount of non-cash assistance | 0 | 0 | 0. | 0 | 0 | 0 | |
| 11-3813663 (Schedule F (Form 990) Part II line 1) | (f) Manner of cash disbursement | WIRE | WIRE | WIRE | WIRE | WIRE | WIRE | |
| | | 131,730. WIRE | 130,000. | 116,750. | 111,100. WIRE | 100,000. WIRE | 100,000. WIRE | |
| LE GIFT FUND | (d) Purpose of grant | CHARITABLE PROJECT | CHARITABLE PROJECT | CHARITABLE PROJECT | CHARITABLE PROJECT | CHARITABLE PROJECT | CHARITABLE PROJECT | |
| (Form 990) THE GOLDMAN SACHS CHARITABLE GIFT FUND Continuation of Grants and Other Assistance to Organizations or Entities | (c) Region | EUROPE (INCLUDING ICELAND AND GREENLAND) | EUROPE (INCLUDING ICELAND AND GREENLAND) | NORTH AMERICA | EUROPE (INCLUDING ICELAND AND GREENLAND) | EUROPE (INCLUDING ICELAND AND GREENLAND) | EAST ASIA AND | EUROPE (INCLUDING |
| THE GOLL | (b) IRS code section and EIN (if applicable) | | | | -3-, · · - M | | | |
| Schedule F (Form 990) | j je | | | | | | | |

.

92,500. WIRE

CHARITABLE PROJECT

EAST ASIA AND PACIFIC 90,701.WIRE

CHARITABLE PROJECT

EUROPE (INCLUDING
ICELAND AND
GREENLAND)

| Schedule F (Form 990) | THE GOL | THE GOLDMAN SACHS CHARITABLE GIFT FUND | BLE GIFT FUND | | 11-3813663 | 663 | | Page 2 |
|-----------------------|--|--|---|--------------------------|-------------------------------------|------------------------------|--|---|
| l ě l | (b) IRS code section and EIN (if applicable) | (c) Region | of organization and EIN (if applicable) (c) Region (d) Purpose of (e) Amount (e) Amount (c) Region (d) Purpose of (e) Amount (c) Amount (c) Region (c) Amount (c) Region (c) Amount (c) Region (c) Amount (c) Region (c) Amount (c) Region (c) Amount (c) Region (c) Amount (c) | (e) Amount of cash grant | (f) Manner of (g) cash disbursement | Amount of non-cash ssistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | .006,300 | WIRE | .0 | | |
| | | NORTH AMERICA | CHARITABLE PROJECT | 80,000. | WIRE | | | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 80,000. | WIRE | 0. | | |
| | | NORTH AMERICA | CHARITABLE PROJECT | 75,000. | WIRE | 0. | | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | ,037,250, | WIRE | 0 | | |
| | | EAST ASIA AND PACIFIC | CHARITABLE PROJECT | 72,460.WIRE | WIRE | 0. | | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 70,000.WIRE | WIRE | 0. | | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 70,000. | WIRE | 0. | | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 65,750. WIRE | WIRE | 0. | | |

| Schedule F (Form 990) | THE GOL | (Form 990) THE GOLDMAN SACHS CHARITABLE GIFT FUND | BLE GIFT FUND | Softed States | 11-3813663 | 1663 | | Page 2 |
|-----------------------|--|---|----------------------|--|---------------------------------|-----------------------------------|--|---|
| j je | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
| | | EUROPE (INCLUDING ICELAND AND | | | | c | | |
| | | CLUDING | CRANITABLE FROECT | one (ee | WIND. | | | |
| | | SKEENLAND) EAST ASIA AND PACIFIC | CHAKLTABLE PROJECT | PO, OOO PATER PRESENTED POOR PATER POOR PATER POOR PATER POOR PATER POOR PATER POOR PATER POOR PATER POOR PATER POOR PATER POOR PATER POOR PATER POOR PATER POOR PATER POOR PATER POOR PATER PATER POOR PATER POOR PATER POOR PATER POOR PATER POOR PATER POOR PATER POOR PATER POOR PATER POOR PATER POOR PATER POOR PATER PATER POOR PAT | VIKE VIRE | | | |
| | | SIA | CHARITABLE PROJECT | • | WIRE | 0 | | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 57,100. | WIRE | .0 | | |
| | | CLUDING | CHARITABLE PROJECT | 54,588. | WIRE | 0. | | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | .006,25 | СНЕСК | .0 | | • |
| · | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | .000,05 | WIRE | 0. | | , |
| | | EAST ASIA AND PACIFIC | CHARITABLE PROJECT | 50,000,WIRE | WIRE | 0. | | |

| Schedule F (Form 990) Part II Continuation o | THE GOL | (Form 990) THE GOLDMAN SACHS CHARITABLE GIFT FUND Continuation of Grants and Other Assistance to Organizations or Entities | BLE GIFT FUND tions or Entities Outside the United States. | United States. | 11-3813663 (Schedule F (Form 990), I | 663 30), Part II, line 1) | | Page 2 |
|--|--|--|--|--------------------------|---|-----------------------------------|--|---|
| 1 (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
| | | EAST ASIA AND PACIFIC | CHARITABLE PROJECT | .000,05 | WIRE | 0. | | |
| | | EAST ASIA AND PACIFIC | CHARITABLE PROJECT | 43,000.WIRE | WIRE | 0 | | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 43,000. | WIRE | 0. | | |
| | | MIDDLE EAST AND NORTH AFRICA | CHARITABLE PROJECT | 40,000. | WIRE | 0 | | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 40,000. | WIRE | 0 | | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 32,750. | WIRE | 0. | | |
| | | EAST ASIA AND PACIFIC | CHARITABLE PROJECT | 31,000. | WIRE | 0. | | |
| | | MIDDLE EAST AND NORTH AFRICA | CHARITABLE PROJECT | 30,000. | WIRE | 0 | | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 30,000.WIRE | WIRE | 0. | | |

| Schedule F (Form 990) | THE GOL | THE GOLDMAN SACHS CHARITABLE | BLE GIFT FUND | | 11-3813663 | 663 | | Page 2 |
|----------------------------|--|--|--|--------------------------|--|-----------------------------------|--|---|
| Part II Continuation o | of Grants and Other | Continuation of Grants and Other Assistance to Organizations | tions or Entities Outside the United States. | Jnited States. | (Schedule F (Form 990), Part II, line 1) | 90), Part II, line 1 | | |
| 1 (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
| | | EAST ASIA AND PACIFIC | CHARITABLE PROJECT | 30,000. WIRE | WIRE | .0 | | |
| | | SOUTH ASIA | CHARITABLE PROJECT | 30,000. | WIRE | .0 | | |
| | | NORTH AMERICA | CHARITABLE PROJECT | 28,220. | снеск | 0. | | |
| | | SOUTH ASIA | CHARITABLE PROJECT | 27,000. | Wire | .0 | | |
| | | SOUTH ASIA | CHARITABLE PROJECT | 23,332. | WIRE | 0 | | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 21,947.WIRE | WIRE | 0. | · | |
| | | NORTH AMERICA | CHARITABLE PROJECT | 21,800. | СНЕСК | 0. | | • |
| | | EAST ASIA AND PACI?IC | CHARITABLE PROJECT | 20,000. | WIRE | 0. | | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 20,000.WIRE | WIRE | 0 | | |

| Schedule F (Form 990) | THE GOL | THE GOLDMAN SACHS CHARITABLE | BLE GIFT FUND | | 11-3813663 | 3663 | | Page 2 |
|-----------------------|--|--|---|--------------------------|---|-----------------------------------|--|---|
| j je | (b) IRS code section and EIN (if applicable) | (c) Region | organization and EIN (if applicable) (c) Region grant (d) Purpose of (e) Amount grant of cash grant | (e) Amount of cash grant | (f) Manner of non-cash cash disbursement assistance | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 20,000. | WIRE | .0 | | |
| | ill or a constant of the const | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 20,000. | WIRE | .0 | | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 20,000. | WIRE | 0. | | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 19,500. | WIRE | 0. | | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 18,380. | WIRE | .0 | | |
| | | SOUTH ASIA | CHARITABLE PROJECT | 18,334. | WIRE | 0. | | |
| | | EAST ASIA AND PACIFIC | CHARITABLE PROJECT | 18,000. | WIRE | 0. | | |
| | | EAST ASIA AND PACIFIC | CHARITABLE PROJECT | 15,000. | WIRE | 0. | | ^ |
| | | SOUTH ASIA | CHARITABLE PROJECT | 15,000.WIRE | WIRE | 0. | | |

| Schedule F (Form 990) Part II Continuation of | THE GOLI | THE GOLDMAN SACHS CHARITABLE GIFT FUND Of Other Assistance to Organizations or Entities | (Form 990) THE GOLDMAN SACHS CHARITABLE GIFT FUND Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. | United States. | 11-3813663 (Schedule F (Form 990), Part II, line 1) | 1663 90), Part II, line 1 | | Page 2 |
|---|---|---|--|--------------------------|--|-----------------------------------|--|---|
| 1 (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
| | | EAST ASIA AND PACIFIC | CHARITABLE PROJECT | 15,000. | WIRE | 0 | | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 15,000. | WIRE | 0. | | |
| | | EAST ASIA AND PACIFIC | CHARITABLE PROJECT | 15,000.WIRE | WIRE | 0. | | |
| | | SOUTH ASIA | CHARITABLE PROJECT | 15,000. CHECK | СНЕСК | 0. | | |
| | | EAST ASIA AND PACIFIC | CHARITABLE PROJECT | .000,21 | WIRE | 0 | | |
| | | NORTH AMERICA | CHARITABLE PROJECT | 15,000. | WIRE | 0. | | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 15,000. | WIRE | .0 | | |
| , | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 15,000.WIRE | WIRE | 0. | | |
| | | EAST ASIA AND PACIFIC | CHARITABLE PROJECT | 14,750. CHECK | СНЕСК | 0 | | |

| Schedule F (Form 990) Part II Continuation o | THE GOLI | (Form 990) THE GOLDMAN SACHS CHARITABLE GIFT FUND Continuation of Grants and Other Assistance to Organizations or Entities | BLE GIFT FUND tions or Entities Outside the United States. | Jnited States. | 11-3813663 (Schedule F (Form 990), F | 663 30), Part II, line 1) | | Page 2 |
|---|---|--|--|-----------------------------|---|-----------------------------------|--|---|
| 1 (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 14,000. | WIRE | 0 | | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 14,000.WIRE | WIRE | 0. | | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 13,500. | WIRE | 0 | : | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 13,200. | WIRE | •0 | | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 13,200. | WIRE | 0 | | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 13,100.WIRE | WIRE | 0. | | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 13,000. | WIRE | 0 | | |
| | | EAST ASIA AND PACIFIC | CHARITABLE PROJECT | 13,000. | WIRE | 0. | | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 13,000. WIRE | WIRE | 0. | | |

| Schedule F (Form 990) | THE GOL | THE GOLDMAN SACHS CHARITABLE GIFT FUND Other Assistance to Organizations or Entities | (Form 990) THE GOLDMAN SACHS CHARITABLE GIFT FUND Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. | United States | 11-3813663 (Schedule F (Form 990) | 1663 90) Part II line 1) | | Page 2 |
|---|--|--|--|--------------------------|--------------------------------------|-----------------------------|--|---|
|) ě | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
| ·- ·- · · · · · · · · · · · · · · · · · | | EUROPE (INCLUDING ICELAND AND | | | | | | |
| | | GREENLAND) | CHARITABLE PROJECT | 13,000. | WIRE | 0 | | |
| | | EUROPE (INCLUDING | | | | | | |
| | | ICELAND AND | | , | | , | | |
| | | GREENLAND) | CHARITABLE PROJECT | 12,500. | WIRE | o | | |
| | | EUROPE (INCLUDING | | | | | | |
| | | ICELAND AND | montoda a lakatakho | 11 | р Р | c | | |
| | | SKEENLAWD) | CHANTIABLE FROJECT | 50 | MINE | | | |
| | | EUROPE (INCLUDING | | | | | | |
| | | ICELAND AND GREENLAND) | CHARITABLE PROJECT | 11,000. | CHECK/WIRE | 0. | | |
| | | EUROPE (INCLUDING | | | | \ | | |
| | | ICELAND AND | | | | - | | |
| | | GREENLAND) | CHARITABLE PROJECT | 11,000. | WIRE | 0. | | |
| | | EUROPE (INCLUDING | | | | | | |
| | | ICELAND AND GREENLAND) | CHARITABLE PROJECT | 10,000, CHECK | снеск | 0. | | |
| | | EUROPE (INCLUDING | | | | | | |
| | | ICELAND AND | | | | | | |
| | | GREENLAND) | CHARITABLE PROJECT | 10,000. | WIRE | 0. | | |
| | | | | | | | | |
| | | NORTH AMERICA | CHARITABLE PROJECT | 10,000. | СНЕСК | 0. | | |
| | | | | | | | | |
| | | EAST ASIA AND PACIFIC | CHARITABLE PROJECT | 10,000. WIRE | WIRE | 0. | | |

| Schedule F (Form 990) Part II Continuation of | THE GOLI | (Form 990) THE GOLDMAN SACHS CHARITABLE GI Continuation of Grants and Other Assistance to Organizations or | BLE GIFT FUND tions or Entities Outside the United States. | | 11-3813663 (Schedule F (Form 990), Part II, line 1) | .663 90), Part II, line 1) | | Page 2 |
|---|---|--|--|---------------|--|-----------------------------------|--|---|
| 1 (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
| | | EUROPE (INCLUDING ICELAND AND | | | | | | |
| | | GREENLAND) | CHARITABLE PROJECT | 10,000. | СНЕСК | 0 | | |
| | | EAST ASIA AND | | | | | | |
| | | PACIFIC | CHARITABLE PROJECT | 10,000.WIRE | WIRE | 0. | | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 10,000.WIRE | WIRE | 0. | | |
| | | EAST ASIA AND PACIFIC | CHARITABLE PROJECT | 100001 | WIRE | .0 | | |
| | | EUROPE (INCLUDING ICELAND AND GREENLAND) | CHARITABLE PROJECT | 10,000. | WIRE | .0 | | |
| | | NORTH AMERICA | CHARITABLE PROJECT | 10,000, CHECK | CHECK | .0 | | |
| | | NORTH AMERICA | CHARITABLE PROJECT | 9,643. | СНЕСК | .0 | | |
| | , | NORTH AMERICA | CHARITABLE PROJECT | 9,643. | СНЕСК | 0. | | |
| | | EAST ASIA AND PACIFIC | CHARITABLE PROJECT | 9,200, WIRE | WIRE | 0. | | |

| Schedule F (Form 990) | THE GOL | (Form 990) THE GOLDMAN SACHS CHARITABLE G | BLE GIFT FUND | United States | 11-3813663 (Schedule F (Form 990) Part II line 1) | 1663 90) Part II line 1 | | Page 2 |
|-------------------------------|--|---|-------------------------|-----------------------------|--|-----------------------------------|--|---|
| 1 (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
| | | | | | | | | |
| | | NORTH AMERICA | CHARITABLE PROJECT | 8,000.CHECK | СНЕСК | 0 | | |
| | | EUROPE (INCLUDING | | | | | | |
| | | ICELAND AND GREENLAND) | CHARITABLE PROJECT | 7,500. | WIRE | 0. | | |
| | | | | | | | | |
| | | EUROPE (INCLUDING ICELAND AND | | | | | | |
| | | GREENLAND) | CHARITABLE PROJECT | 7,500. | WIRE | 0. | | |
| | | EAST ASIA AND | | | | | | |
| | | PACIFIC | CHARITABLE PROJECT | 7,320.WIRE | WIRE | 0. | | |
| | | EUROPE (INCLUDING | | | | | | |
| | | ICELAND AND | | | ! | | | |
| | | GREENLAND) | CHARITABLE PROJECT | 7,002. | WIRE | ò | | |
| | | EUROPE (INCLUDING ICELAND AND | | | | | | |
| | | GREENLAND) | CHARITABLE PROJECT | 7,000.WIRE | WIRE | 0. | | |
| | | EUROPE (INCLUDING | | | | | | |
| | | ICELAND AND | CHANTER DOCTOR | 6 750 | 000 | c | | |
| | | SWITHILLIAM CONTRACTOR | | ٠١ | | | | |
| | | ICELAND AND | | | | | | |
| | | GREENLAND) | CHARITABLE PROJECT | 6,650. | WIRE | 0. | | |
| | | EUROPE (INCLUDING | | | | | | |
| | | ICELAND AND | | 1 | | , | | |
| _ | | GREENLAND) | CHARITABLE PROJECT | 6,630.WIRE | WIRE | .0 | | |

| Page 2 | | of t, FMV, her) | | | | | | | |
|--|---|---|--------------------|--------------------------|--|--|--------------------|--|--|
| a. | | (i) Method of valuation (book, FMV, appraisal, other) | | | | | | | |
| | (| (h) Description of non-cash assistance | | | | | | | |
| 1663 | 90), Part II, line 1 | (g) Amount of non-cash assistance | .0 | 0.0 | 0 | .0 | .0 | | |
| 11-3813663 | (Schedule F (Form 990), Part II, line 1) | (f) Manner of cash disbursement | #IRE | WIRE | WIRE | 41RE | CHECK | | |
| | | (e) Amount of cash grant | 6,500. WIRE | .005,9 | 009'9 | 6,000, WIRE | 9.000,9 | | |
| THE GOLDMAN SACHS CHARITABLE GIFT FUND | ons or Entities Outside the United States. | (d) Purpose of grant | CHARITABLE PROJECT | CHARITABLE PROJECT | CHARITABLE PROJECT | CHARITABLE PROJECT | CHARITABLE PROJECT | | |
| | Continuation of Grants and Other Assistance to Organizations or | (c) Region | EAST ASIA AND | EAST ASIA AND PACIFIC | EUROPE (INCLUDING ICELAND AND GREENLAND) | EUROPE (INCLUDING ICELAND AND GREENLAND) | AND | | |
| THE GOLD | Grants and Other | (b) IRS code section and EIN (if applicable) | | | | | | | |
| Schedule F (Form 990) | Part II Continuation of | 1 (a) Name of organization | | | | | | | |

| _ | |
|-------------------------------|--|
| FUND | |
| GIFT | |
| AN SACHS CHARITABLE GIFT FUND | |
| SACHS | |
| THE GOLDMAN | |
| THE | |
|) 2018 | |
| Form 990 | |
| Schedule F (| |

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Page 3

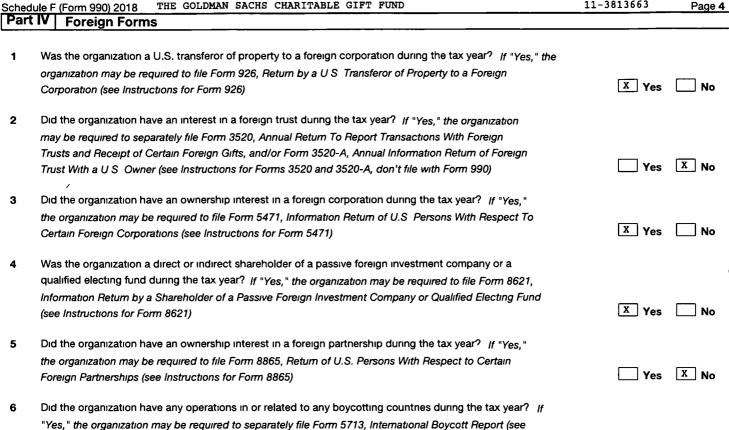
11-3813663

Part III can be duplicated if additional space is needed.

| (h) Method of valuation (book, FMV, appraisal, other) | | | | | | |
|---|---|--|--|--|---|--|
| (g) Description of noncash assistance | | | | | | |
| (f) Amount of noncash assistance | | | | | | |
| (e) Manner of cash disbursement | ı | | | | | |
| (d) Amount of cash grant | | | | | : | |
| (c) Number of recipients | | | | | | |
| (b) Region | | | | | | |
| (a) Type of grant or assistance (b) Region | · | | | | | |

Schedule F (Form 990) 2018

Instructions for Form 5713, don't file with Form 990)



Schedule F (Form 990) 2018

Yes

X No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of

| investments vs. expenditures per region), Part II, line 1 (accounting method); Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions. |
|---|
| PART I, LINE 2: |
| GENERAL INFORMATION ON ACTIVITIES OUTSIDE THE UNITED STATES |
| THE GOLDMAN SACHS CHARITABLE GIFT FUND ("GOLDMAN SACHS GIVES") HAS |
| WRITTEN AGREEMENTS WITH ALL FOREIGN GRANTEES AND REQUIRES THAT ALL |
| FOREIGN EXPENDITURE RESPONSIBILITY GRANTEES SUBMIT AFTER THE END OF EACH |
| FISCAL YEAR IN WHICH THE GRANTEE RECEIVES A PAYMENT OF GRANT FUNDS OR HAS |
| ANY UNEXPENDED GRANT FUNDS, A FINANCIAL AND NARRATIVE REPORT DETAILING |
| THE PROGRESS MADE TOWARDS THE GOALS OF THE GRANT AND REPORTING ON THE USE |
| OF GRANT FUNDS. THESE REPORTS MUST BE SIGNED BY AN OFFICER OF THE |
| GRANTEE ORGANIZATION. THE REPORTS ARE REVIEWED UPON RECEIPT. |
| ADDITIONALLY, GOLDMAN SACHS GIVES HAS THE RIGHT TO INSPECT RECORDS OF |
| RECEIPTS AND EXPENDITURES OF THE GRANT FUNDS UPON REQUEST. |
| · |
| PART I, LINE 3: |
| THE GRANT EXPENSES REPORTED IN PART I, LINE 3 AND PART II ARE ACCOUNTED |
| FOR USING THE ACCRUAL METHOD OF ACCOUNTING IN CONFORMITY WITH GOLDMAN |
| SACHS GIVES AUDITED FINANCIAL STATEMENTS. |
| PART IV, FOREIGN FORMS, LINES 1, 3 & 4: |
| THE ORGANIZATIONS IS REQUIRED TO FILE FORM 5471 BECAUSE IT MEETS THE |
| APPLICABLE THRESHOLD OWNERSHIP REQUIREMENT. |
| |
| THE ORGANIZATION IS NOT REQUIRED TO FILE FORMS 926 AND 8621 BECAUSE IT |
| DOES NOT MEET THE FILING REQUIREMENTS. |
| |

Schedule I (Form 990) (2018)

86

832102 11-02-18

Page 2

11-3813663

THE GOLDMAN SACHS CHARITABLE GIFT FUND

Schedule I (Form 990) (2018)

| Schedule I (Form 990) | THE GOLDMAN SACHS CHARITABLE GIFT FUND | 11-3813663 | Page 2 |
|--|--|---------------|--------|
| Schedule I (Form 990) Part IV Supplemental | Information | | |
| | | | |
| GOLDMAN SACHS GIVES IS | AWARE THAT A GRANTEE DIVERTED A CHARITABLE GRANT FOR | | |
| | | | |
| NON-CHARITABLE USE, IT | WILL EVALUATE THE SITUATION AND TAKE APPROPRIATE | | |
| | | | |
| ACTION. | | | |
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SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

Name of the organization ,

Employer identification number

| | THE GOLDMAN SACHS | CHARITABI | E GIFT FUND | | 11-3 | 81366 | . 3 | |
|-----|--|-------------------------------|---|---|--|--------|-----|----|
| Pai | t I Types of Property | | • | , | <u>, </u> | | | |
| | - | (a) Check if applicable | (b) Number of contributions or items contributed | (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g | (d) Method of de noncash contribu | termir | - | :s |
| 1 | Art - Works of art | | | | | | | |
| 2 | Art - Historical treasures | | | | | | | |
| 3 | Art - Fractional interests | | | | | | | |
| 4 | Books and publications | | | | | | | |
| 5 | Clothing and household goods | | | | | | | |
| 6 | Cars and other vehicles | | | | | | | |
| 7 | Boats and planes | | | | | | | |
| 8 | Intellectual property | | | | | | | |
| 9 | Securities - Publicly traded | X | 574 | 20,172,746. | HIGH/LOW AVERAGE | | | |
| 10 | Securities - Closely held stock | | | | | | | |
| 11 | Securities - Partnership, LLC, or | | | | , | | | |
| | trust interests | | | | | | | |
| 12 | Securities - Miscellaneous | | • | | | | | |
| 13 | Qualified conservation contribution - | | | | | | | |
| | Historic structures | | | | | | | |
| 14 | Qualified conservation contribution - Other | | | | | | | |
| 15 | Real estate - Residential | | | | | | | |
| 16 | Real estate - Commercial . | | | | | | | |
| 17 | Real estate - Other ' | | | | | | | |
| 18 | Collectibles | | | | | | | |
| 19 | Food inventory | | | • | | | | |
| 20 | Drugs and medical supplies | | | | | | | |
| 21 | Taxidermy | | | | | | | |
| 22 | Historical artifacts | | | | | | | |
| 23 | Scientific specimens | | | | | | | |
| 24 | Archeological artifacts | | | | | | | |
| 25 | Other () | | | | | | | |
| 26 | Other | | | | | | | |
| 27 | Other () | | | | | | | |
| 28_ | Other (| | | | | | | |
| 29 | Number of Forms 8283 received by the organiz | ation during | the tax year for co | ontributions | | | | |
| | for which the organization completed Form 828 | 3, Part IV, E | Donee Acknowledg | ement 29 | | | 0 | |
| | | | | | | | Yes | No |
| 30a | During the year, did the organization receive by | contributio | n any property rep | orted in Part I, lines 1 throug | h 28, that it | | | |
| | must hold for at least three years from the date | of the initia | l contribution, and | which isn't required to be us | sed for | | | |
| | exempt purposes for the entire holding period? | | | • | | 30a | | Х |
| b | If "Yes," describe the arrangement in Part II. | | | | | | | |
| 31 | Does the organization have a gift acceptance p | olicy that re | quires the review o | of any nonstandard contribut | ions? | 31 | X | |
| 32a | Does the organization hire or use third parties of | or related or | ganizations to solic | cit, process, or sell noncash | | | | |
| | contributions? | | | | | 32a | x | L |
| b | If "Yes," describe in Part II. | | | | | | | |
| 33 | If the organization didn't report an amount in co | olumn (c) for | a type of property | for which column (a) is ched | ked, | | | |
| | describe in Part II | | · · · · | | | i | | 1 |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2018

832142 10-18-18 Schedule M (Form 990) 2018

SCHEDULE 0

(Form 990 or 990-EZ)

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

Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

| THE GOLDMAN SACHS CHARITABLE GIFT FUND | 11-3813663 |
|--|--|
| FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: | |
| THE GOLDMAN SACHS CHARITABLE GIFT FUND ("GOLDMAN SACHS GIVES") IS A | |
| DONOR ADVIGED FUND AVAILABLE TO CURRENT AND RETIRED SENIOR EMPLOYEES OF | |
| GOLDMAN SACHS. GOLDMAN SACHS GIVES MAINTAINS DONOR ADVISED ACCOUNTS | |
| FROM WHICH DONORS AND DONOR ADVISORS CAN RECOMMEND GRANTS TO QUALIFIED | |
| CHARITABLE ORGANIZATIONS. GOLDMAN SACHS GIVES IS COMMITTED TO FOSTERING | |
| INNOVATIVE IDEAS, SOLVING ECONOMIC AND SOCIAL ISSUES, AND ENABLING | |
| PROGRESS IN UNDERSERVED COMMUNITIES GLOBALLY. | |
| FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: | |
| THE GOLDMAN SACHS CHARITABLE GIFT FUND ("GOLDMAN SACHS GIVES") IS A | |
| DONOR ADVISED FUND AVAILABLE TO CURRENT AND RETIRED SENIOR EMPLOYEES OF | |
| GOLDMAN SACHS, GOLDMAN SACHS GIVES MAINTAINS DONOR ADVISED ACCOUNTS | |
| FROM WHICH DONORS AND DONOR ADVISORS CAN RECOMMEND GRANTS TO QUALIFIED | |
| CHARITABLE ORGANIZATIONS. GOLDMAN SACHS GIVES IS COMMITTED TO FOSTERING | ······································ |
| INNOVATIVE IDEAS, SOLVING ECONOMIC AND SOCIAL ISSUES, AND ENABLING | |
| PROGRESS IN UNDERSERVED COMMUNITIES GLOBALLY. | |
| FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: | |
| THE GOLDMAN SACHS CHARITABLE GIFT FUND ("GOLDMAN SACHS GIVES") | · |
| ACCOMPLISHES ITS CHARITABLE PURPOSES BY RECEIVING CHARITABLE | |
| CONTRIBUTIONS AND MAKING GRANTS EXCLUSIVELY FOR CHARITABLE, SCIENTIFIC, | |
| LITERARY, OR EDUCATIONAL OR RELIGIOUS PURPOSES, PRIMARILY TO | |
| ORGANIZATIONS DESCRIBED IN SECTION 170(D)(1)(A) OF THE INTERNAL REVENUE | |
| CODE OF 1986, AS AMENDED (THE "CODE"). THE ORGANIZATION OPERATES AS A | |
| LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 832211 10-10-18 | Schedule O (Form 990 or 990-EZ) (2018) |

| Schedule O (Form 990 or 990-EZ) (2018) | Page 2 |
|---|---|
| Name of the organization THE GOLDMAN SACHS CHARITABLE GIFT FUND | Employer identification number 11-3813663 |
| "SPONSORING ORGANIZATION" WITHIN THE MEANING OF CODE SECTION 4966 AND | |
| MAINTAINS DONOR ADVISED FUNDS. FOR THE FISCAL YEAR ENDING JUNE 30, | |
| 2019, THE ORGANIZATION MADE APPROXIMATELY 7,000 GRANTS TOTALING \$157 | |
| MILLION; APPROXIMATELY \$83 MILLION WAS MADE EXCLUSIVELY FOR NEED BASED | |
| SCHOLARSHIPS, FINANCIAL AID AND OTHER EDUCATIONAL PROGRAMS. | |
| FORM 990, PART VI, SECTION A, LINE 2: | |
| THE FOLLOWING DIRECTORS AND OFFICERS HAVE A BUSINESS RELATIONSHIP WITH EACH | |
| OTHER BECAUSE THEY ARE OFFICERS IN THE SAME BUSINESS OR INVESTMENT ENTITY | |
| OR BECAUSE THEY ARE EMPLOYED BY A COMPANY WHERE A GOLDMAN SACHS CHARITABLE | |
| GIFT FUND OFFICER OR DIRECTOR IS AN OFFICER OR DIRECTOR: | _ |
| | |
| - JOHN F. W. ROGERS | _ |
| - BENJAMIN J. RADER | |
| - EILEEN M. DILLON | |
| - STEVE M. BUNSON | |
| - MICHAEL J. CIVITELLA | |
| - KENNETH SHEINMAN | |
| - ANNE H. BLACK | |
| - EMMETT C. ST. JOHN | <u>-</u> |
| - JANE MOFFAT | |
| - BRAD WEINSTEIN | |
| - THOMAS MORIN | |
| - JENNY MALONE | |
| | |
| FORM 990, PART VI, SECTION A, LINE 8B: | |
| THERE ARE NO COMMITTEES IN PLACE WITH THE ABILITY TO ACT ON BEHALF OF THE | |
| BOARD. | |

AND REVIEWED ANNUALLY BY THE GENERAL COUNSEL OF GOLDMAN SACHS GIVES, TO

ENSURE COMPLIANCE WITH GOLDMAN SACIS GIVES CONFLICT OF INTEREST POLICY. THE

POLICY ALSO REQUIRES ANY DIRECTOR OR OFFICER TO FROMFTLY DISCLOSE ANY

CONFLICTS OF INTEREST. INTERESTED DIRECTORS AND OFFICERS ARE REQUIRED TO

RECUSE THEMSELVES FROM ANY DECISION ON MATTERS IN WHICH THEY HAVE AN

INTEREST.

FORM 990, PART VI, SECTION B, LINE 15:

THE GOLDMAN SACHS CHARITABLE GIFT FUND DOES NOT HAVE ANY EMPLOYEES AND DOES

NOT PAY COMPENSATION TO ITS OFFICERS OR DIRECTORS.

| Schedule O (Form 990 or 990-EZ) (2018) | Page 2 |
|---|---|
| Name of the organization THE GOLDMAN SACHS CHARITABLE GIFT FUND | Employer identification number 11-3813663 |
| FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: | |
| CA,FL,GA,HI,IL,MD,MA,NJ,NY,NC,PA,SC,TN,UT,VA,WI | |
| | |
| FORM 990, PART VI, SECTION C, LINE 19: | |
| THE GOLDMAN SACHS CHARITABLE GIFT FUND ("GOLDMAN SACHS GIVES") MAKES THE | |
| DOCUMENTS LISTED IN PART VI, LINE 19 AVAILABLE TO THE PUBLIC UPON REQUEST. | |
| THE FINANCIAL STATEMENTS AND GOVERNING DOCUMENTS ARE ALSO AVAILABLE THROUGH | |
| PUBLICLY ACCESSIBLE STATE FILINGS. THE FULL FORM 990 IS AVAILABLE UPON | |
| REQUEST FROM GOLDMAN SACHS GIVES. | |
| | |
| FORM 990, PART XII, LINE 2C: | |
| RATHER THAN DELEGATE THIS RESPONSIBILITY TO A COMMITTEE, THE FULL BOARD | |
| OF DIRECTORS OF THE GOLDMAN SACHS CHARITABLE GIFT FUND ASSUMES | |
| RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF THE FINANCIAL STATEMENTS, | |
| AS WELL AS SELECTION OF AN INDEPENDENT ACCOUNTANT. THIS PROCESS HAS | |
| NOT CHANGED FROM PRIOR YEAR REPORTING. | |
| <u> </u> | |
| | |
| FORM 990, PART VI, SECTION B, LINE 10A: | |
| THE GOLDMAN SACHS CHARITABLE GIFT FUND ("GOLDMAN SACHS GIVES") IS THE | |
| SOLE MEMBER OF TWO REGISTERED UK CHARITIES, THE GOLDMAN SACHS | |
| CHARITABLE GIFT FUND (UK) AND GOLDMAN SACHS GIVES (UK). | |
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SCHEDULE R

(Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

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

2018

OMB No 1545-0047

Open to Public Inspection

THE GOLDMAN SACHS CHARITABLE GIFT FUND Name of the organization Department of the Treasury Internal Revenue Service

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

Parti

Employer identification number 11-3813663

| (a) | (q) | (၁) | (p) | (e) | (J) |
|---|---|---|------------------------|--------------------|----------------------------------|
| Name, address, and EIN (if applicable) of disregarded entity | Pnmary activity | Legal domicile (state or foreign country) | Total income | End-of-year assets | Direct controlling entity |
| THE GOLDMAN SACHS CHARITABLE GIFT FUND (UK) | | | | | |
| PLUMTREE COURT, 25 SHOE LANE | | | | | THE GOLDMAN SACHS |
| LONDON, UNITED KINGDOM EC4A 4AU | CHARITABLE | UNITED KINGDOM | 3,187,631. | 17,785,261. | 17,785,261. CHARITABLE GIFT FUND |
| | | | | | |
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| | | | | | |
| Part II Identification of Related Tax-Exempt Organizations. Complete I organizations during the tax year. | tions. Complete if the organization ans | if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt | t IV, line 34, because | t had one or more | related tax-exempt |

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Exempt Code section | (e) Public charity status (if section | (f) Direct controlling entity | (g) Section 512(b)(13) controlled entity? | (b)(13) led ? |
|--|-------------------------|---|-------------------------------|---------------------------------------|-------------------------------|--|---------------------|
| | | • | | 501(c)(3)) | | Yes | N _S |
| GOLDMAN SACHS GIVES (UK) | | | | | THE GOLDMAN SACHS | | |
| PLUMTREE COURT, 25 SHOE LANE | | | | | CHARITABLE GIFT | | |
| LONDON, UNITED KINGDOM EC4A 4AU | CHARITABLE | UNITED KINGDOM | | | FUND | × | |
| THE GOLDMAN SACHS FOUNDATION - 23-7000346 | | | | | | | |
| 200 WEST STREET, 29TH PLOOR | | | | | THE GOLDMAN SACHS | | |
| NEW YORK, NY 10282 | CHARITABLE | NEW YORK | 501(C)(3) | PF | GROUP, INC. | | × |
| | | | | | | | |
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2018

Schedule R (Form 990) 2018 THE GOLDMAN SACHS CHARITABLE GIPT FUND

Part III

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

Page 2

| ا مہا | ı | , | |] |
|---|---|-----------------|-----------------|-------|
| (j) (k) General or Percentage managing partner? Yes No | | | | |
| Perc | | | _ | |
| (j) General or managing partner? Yes No | | | | |
| _ × a (S) | | | | |
| V-UBI | [| | | |
| Code V-UBI amount in box amount in box code V-K-1 (Form 1065) N | | | | |
| ~ 1 ~ 2687 | | | | |
| (h) Disproportionate allocations? Yes No | | | | |
| Olspropo alfocati | | | | |
| f ar | | | | |
| (g) Share of end-of-year assets | | | | |
| S) end | | | | |
| | | | | |
| (f) Share of total income | | | | |
|) Share inc | | | | |
| , ta | | | | |
| ncome lated, ax und -514) | | | | |
| (e) Inant II I, unre from ta | | | | |
| (e) Predominant income (related, unrelated, excluded from tax under sections 512-514) | | | | |
| exc (exc | | | | |
| (d) t controlling entity | | | | |
| (d) t contro entity | | | | |
| Direct | | | | |
| () ral cule s or try) | | | | |
| (c) Legal domicile (state or foreign country) | | | | |
| <u></u> | | | | |
| activi | | | | |
| (b) Primary activity | | | | |
| _ <u>&</u> _ | | | | |
| | | | | |
| <u>Z</u> c | | | | |
| (a) Name, address, and EIN of related organization | | $ \ \ \ $ | | |
| (a) Iress, orgar | | | | |
| e, add | | | $ \ \ \ \ $ | |
| Name of re | | $ \ \ \ \ $ | $ \ \ \ \ $ | |
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| | | | | |

Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year. Part IV

| | | | | 11 | | | | | | | | |
|---|----------|------------------------|-------------------------|----------|---|--|---|--|--|--|--|--|
| | _ | 13) | olled ty? | ٥N | | | | | | | | |
| | <u>:</u> | 512(b | controlled entity? | Yes | | | | | | | | |
| | Ξ | Percentage | ownership | | _ | | | | | | | |
| | | | end-of-year | gasers | | | | | | | | |
| | | Share of total | | | | | | | | | | |
| | (e) | Type of entity | (C corp, S corp, | fish in | | | | | | | | |
| | (g) | Direct controlling | entity | | | | | | | | | |
| | <u> </u> | Legal domictle | (state or foreign | country) | | | · | | | | | |
| ing the tax year. | (Q) | Primary activity | | | | | | | | | | |
| organizations treated as a corporation of trast dolling the tax year. | (a) | Name, address, and EIN | of related organization | | | | | | | | | |

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Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

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| 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? | s with one or more rel | ated organizations listed | ın Parts II-IV? | | | |
|--|----------------------------|--------------------------------|---|----------------------------|----------|----------|
| a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity | ` | | | 1 2 | × | |
| b Giff, grant, or capital contribution to related organization(s) | | | | 1p | × | |
| c Giff, grant, or capital contribution from related organization(s) | | | | 10 | × | |
| d Loans or loan guarantees to or for related organization(s) | | | | 1 | × | |
| e Loans or loan guarantees by related organization(s) | | | | 1e | × | |
| | | | | | | |
| f Dividends from related organization(s) | | | | 14 | × | |
| g Sale of assets to related organization(s) | | | | 19 | × | |
| h Purchase of assets from related organization(s) | | | | Ŧ | x | 1 |
| i Exchange of assets with related organization(s) | | | | ij | X (| |
| j Lease of facilities, equipment, or other assets to related organization(s) | | | | ; - | × | 1 |
| k Lease of facilities, equipment, or other assets from related organization(s) | | | | * | × | |
| I Performance of services or membership or fundraising solicitations for related organization(s) | nization(s) | | | = | × | |
| m Performance of services or membership or fundraising solicitations by related organization(s) | nization(s) | | | £ | × | |
| n Shanng of facilities, equipment, mailing lists, or other assets with related organization(s) | on(s) | | | 1h | × | |
| Shanng of paid employees with related organization(s) | | | | 10 | × | |
| B Reimbursement paid to related organization(s) for expenses | | | | 9 | × | |
| | | | | , | } | |
| d neimbousement paro by related organization(s) for expenses | | | | <u>D</u> | | |
| r Other transfer of cash or property to related organization(s) | | | | + | × | |
| s Other transfer of cash or property from related organization(s) | | | | 1s | × | |
| 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. | ho must complete the | s line, including covered i | elationships and transaction thresholds. | | | |
| (a) Name of related organization | (b) Transaction type (a·s) | (c) Amount involved | (d) Method of determining amount involved | nvolved | | |
| 1) | | | | | | N |
| [5] | | | | | | |
| 3) | | | | | | |
| (†) | | | | | | |
| (5) | | | | | | |
| (9) | | | | | | |
| 12163 10-02-18 | 96 | | Schedul | Schedule R (Form 990) 2018 | 90) 2018 | |

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Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

| | _ , | | | - | |
|--|----------------|------|------|---|--|
| (k) Percentage ownership | | | | | |
| General or managing partner? | | | | | |
| Gen 10 mar 7es | | | | | |
| Code V-UBI General or Percentage amount in box 20 managing of Schedule K-1 partner? (Form 1065) Yes No | | | | | |
| Disproportionate allocations? | | | | | |
| Disp. | | | | | |
| (g) Share of end-of-year assets | | | | | |
| (f) Share of total | | | | | |
| (e) Are all partners sec. 501(c)(3) 01gs? Yes No | | | | | |
| (d) Predominant income (related, unrelated, excluded from tax under sections 512-514) | | | | | |
| (c) Legal domicile (state or foreign country) | | | | | |
| (b) Pnmary activity | | | | | |
| (a) Name, address, and EIN of entity | | | | | |

Schedule R (Form 990) 2018

| Schedule R (Form 990) 2018 THE GOLDMAN SACHS CHARITABLE GIFT FUND | 11-3813663 | Page 5 |
|--|-------------|--------|
| Part VII Supplemental Information. | | |
| Provide additional information for responses to questions on Schedule R. See instructions. | | • |
| | | |
| SCHEDULE R, PART II: | | |
| | | |
| GOLDMAN SACHS GIVES (UK) IS A CHARITY INCORPORATED UNDER THE COMPANIES | <u> </u> | |
| | | |
| ACT OF 1985 AS A PRIVATE COMPANY LIMITED BY GUARANTEE AND NOT HAVING A | | |
| | | |
| SHARE CAPITAL, FORMED IN THE UNITED KINGDOM ON APRIL 11, 2008. THE | | |
| | | |
| GOLDMAN SACHS CHARITABLE GIFT FUND ("GOLDMAN SACHS GIVES") IS THE SOLE | | |
| | | |
| MEMBER OF GOLDMAN SACHS GIVES (UK). THEREFORE, THE GOLDMAN SACHS | | |
| | | |
| CHARITABLE GIFT FUND CONTROLS GOLDMAN SACHS GIVES (UK) FOR PURPOSES OF | | |
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| THE INFORMATION RETURN OF US PERSONS WITH RESPECT TO CERTAIN FOREIGN | | |
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| CORPORATIONS. | | |
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