efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

## DLN: 93491316012590

OMB No. 1545-0052

2019

## **Return of Private Foundation**

Department of the Treasury Internal Revenue Service

Form 990-PF

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

| For                         | caler              | ndar year 2019, or tax year beginning 01-01-20   | )19 , aı                                     | nd ending 12-31-                      | 2019   |   |
|-----------------------------|--------------------|--|--|---------------------------------------|--|---|
|                             |                    | undation<br>TIRE FOUNDATION  |  | , ,                                   | entification numbe                             | r   |
|                             |                    |  |  | 20-8066058                            |  |   |
|                             | ber and<br>O BOX : | d street (or P.O. box number if mail is not delivered to street address)<br>1707                                 | Room/suite                                   | <b>B</b> Telephone nu                 | mber (see instruction                          | ns)                                       |
|                             |                    |  |  | (650) 845-8100                        | )  |   |
|                             |                    | n, state or province, country, and ZIP or foreign postal code<br>, CA 94023                                      |  | <b>C</b> If exemption                 | application is pendin                          | g, check here                             |
| G CI                        | neck al            | that apply: ☐ Initial return ☐ Initial return of a   | former public charity                        | <b>D 1.</b> Foreign or                | ganizations, check he                          | re  |
|                             |                    | Final return Amended return  |  |                                       | ganizations meeting                            |   |
|                             |                    | $\square$ Address change $\square$ Name change   |  | , , , , , , , , , , , , , , , , , , , | k here and attach co                           | · -                                       |
| H C                         | neck ty            | ype of organization: $\  \  \  \  \  \  \  \  \  \  \  \  \ $  | foundation                                   |                                       | ındation status was t<br>n 507(b)(1)(A), chec  |   |
|                             | Section            | n 4947(a)(1) nonexempt charitable trust  | e private foundation                         |                                       |  |   |
|                             |                    | from Part II col (c)   | ☑ Cash ☐ Accru                               | al F If the founda                    | ation is in a 60-month<br>n 507(b)(1)(B), chec |   |
|                             |                    | ►\$ 24,273,975   | be on cash basis.)                           | under seeds                           | 11 307 (B)(1)(B), chec                         | K Here                                    |
| Pa                          | rt I               | Analysis of Revenue and Expenses (The total  |  |                                       |  | (d) Disbursements                         |
|                             |                    | of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).) | (a) Revenue and expenses per books           | (b) Net investment income             | (c) Adjusted net income                        | for charitable purposes (cash basis only) |
|                             | 1                  | Contributions, gifts, grants, etc., received (attach schedule)   | 2,439,230                                    |                                       |  |   |
|                             | 2                  | Check ▶ ☐ if the foundation is <b>not</b> required to attach   | , ,  |                                       |  |   |
|                             |                    | Sch. B   |  |                                       |  |   |
|                             | 3                  | Interest on savings and temporary cash investments   | 250.774                                      | 200 244                               |  |   |
|                             | 4<br>  5a          | Dividends and interest from securities   | 359,774                                      | 308,314                               |  |   |
|                             | b                  | Net rental income or (loss)  |  |                                       |  |   |
| Θ                           | 6a                 | Net gain or (loss) from sale of assets not on line 10  | 5,126,255                                    |                                       |  |   |
| E                           | ь                  | Gross sales price for all assets on line 6a  |  |                                       |  |   |
| Revenue                     |                    | 25,038,957   |  |                                       |  |   |
|                             | 7                  | Capital gain net income (from Part IV, line 2)   |  | 7,337,974                             |  |   |
|                             | 8                  | Net short-term capital gain  |  |                                       |  |   |
|                             | 10a                | Gross sales less returns and allowances  |  |                                       |  |   |
|                             | b                  | Less: Cost of goods sold   | <u>.                                    </u> |                                       |  |   |
|                             | c                  | Gross profit or (loss) (attach schedule)   |  |                                       |  |   |
|                             | 11                 | Other income (attach schedule)   | <b>%</b> J 32                                | 32                                    | 0  |   |
|                             | 12                 | Total. Add lines 1 through 11  | 7,925,291                                    | 7,646,320                             | 0  |   |
|                             | 13                 | Compensation of officers, directors, trustees, etc.  | C  | 0                                     | 0  | 0   |
|                             | 14                 | Other employee salaries and wages  |  |                                       |  |   |
| es                          | 15                 | Pension plans, employee benefits   |  |                                       |  |   |
| sue                         | 16a                | Legal fees (attach schedule)   |  |                                       |  |   |
| and Administrative Expenses | Ь                  | Accounting fees (attach schedule)  | 5,595  | 0                                     | 0  | 5,595                                     |
| e E                         | С                  | Other professional fees (attach schedule)  |  |                                       |  |   |
| ativ                        | 17                 | Interest   | 00.1   |                                       |  |   |
| istr                        | 18                 | Taxes (attach schedule) (see instructions)   | 21,350                                       | 7,007                                 | 0  | 0   |
| in.                         | 19                 | Depreciation (attach schedule) and depletion   |  |                                       |  |   |
| Adı                         | 20                 | Occupancy  |  |                                       |  |   |
| pu                          | 21                 | Printing and publications  |  |                                       |  |   |
|                             | 23                 | Other expenses (attach schedule)   | 11,237                                       | 11,217                                | 0  | 0   |
| Operating                   | 24                 | Total operating and administrative expenses.   | =======================================      |                                       |  |   |
| ære                         |                    | Add lines 13 through 23  | 38,182                                       | 18,224                                | 0  | 5,595                                     |
| Ö                           | 25                 | Contributions, gifts, grants paid  | 1,497,727                                    | ·                                     |  | 1,497,727                                 |
|                             | 26                 | Total expenses and disbursements. Add lines 24 and 25  | 1 525 000                                    | 10 224                                | _  | 1 502 222                                 |
|                             | 27                 | Subtract line 26 from line 12:   | 1,535,909                                    | 18,224                                | 0  | 1,503,322                                 |
|                             | a                  | Excess of revenue over expenses and  |  |                                       |  |   |
|                             |                    | disbursements Net investment income (if negative, enter -0-)   | 6,389,382                                    |                                       |  |   |
|                             | b<br>c             | Adjusted net income (if negative, enter -0-)   |  | 7,628,096                             | _  |   |
| For                         |                    | work Reduction Act Notice, see instructions.   | I  | Cat. No. 11289>                       | ] 0<br>( For                                   | <u> </u><br>m <b>990-PF</b> (2019)        |

| Forr        | n 990-l  | PF (2019)  |                                       |             |                      | Page <b>2</b>            |
|-------------|----------|--|---------------------------------------|-------------|----------------------|--------------------------|
| Pa          | rt II    | Balance Sheets Attached schedules and amounts in the description column                    | Beginning of year                     |             |                      | f year                   |
|             | 1        | should be for end-of-year amounts only. (See instructions.)  Cash—non-interest-bearing     | (a) Book Value                        | (           | <b>b)</b> Book Value | (c) Fair Market Value    |
|             | 2        | Savings and temporary cash investments   | 0                                     |             | 808,460              | 808,460                  |
|             | 3        | Accounts receivable  | _                                     |             |                      | 333,133                  |
|             | •        | Less: allowance for doubtful accounts ▶  |                                       |             |                      |                          |
|             | 4        | Pledges receivable   |                                       |             |                      | _                        |
|             |          | Less: allowance for doubtful accounts ▶  |                                       |             |                      |                          |
|             | 5        | Grants receivable  |                                       |             |                      |                          |
|             | 6        | Receivables due from officers, directors, trustees, and other                              |                                       |             |                      | -                        |
|             |          | disqualified persons (attach schedule) (see instructions)                                  |                                       |             |                      |                          |
|             | 7        | Other notes and loans receivable (attach schedule)   |                                       |             |                      |                          |
|             |          | Less: allowance for doubtful accounts ▶  | '                                     |             |                      |                          |
| ß           | 8        | Inventories for sale or use  |                                       |             |                      |                          |
| Assets      | 9        | Prepaid expenses and deferred charges  |                                       |             |                      |                          |
| As          | 10a      | Investments—U.S. and state government obligations (attach schedule)                        |                                       |             |                      |                          |
|             | b        | Investments—corporate stock (attach schedule)  | 17,675,430                            | <b>કુ</b> ગ | 23,464,523           | 23,464,523               |
|             | C        | Investments—corporate bonds (attach schedule)  |                                       |             |                      |                          |
|             | 11       | Investments—land, buildings, and equipment: basis ▶  |                                       |             |                      |                          |
|             |          | Less: accumulated depreciation (attach schedule) ▶   |                                       |             |                      |                          |
|             | 12       | Investments—mortgage loans   |                                       |             |                      |                          |
|             | 13       | Investments—other (attach schedule)  |                                       |             |                      |                          |
|             | 14       | Land, buildings, and equipment: basis  |                                       |             |                      |                          |
|             |          | Less: accumulated depreciation (attach schedule)   | as 1                                  | AB 1        |                      | as 1                     |
|             | 15       |  | 0                                     | <b>₩</b>    | 992                  | 992                      |
|             | 16       | Total assets (to be completed by all filers—see the  |                                       |             |                      |                          |
|             |          | instructions. Also, see page 1, item I)  | 17,675,430                            |             | 24,273,975           | , ,                      |
|             | 17       | Accounts payable and accrued expenses  |                                       |             | 3,870                |                          |
| Š           | 18       | Grants payable   |                                       |             |                      |                          |
| litie       | 19       | Deferred revenue   |                                       |             |                      |                          |
| Liabilities | 20<br>21 | Mortgages and other notes payable (attach schedule)  |                                       |             |                      |                          |
|             | 22       |  | <b>9</b>                              | <b>∞</b> ,] | 2,114,704            |                          |
|             | 23       | Total liabilities(add lines 17 through 22)   | 0                                     | -           | 2,118,574            |                          |
| _           |          |  | _                                     |             |                      |                          |
| Balances    |          | Foundations that follow FASB ASC 958, check here ► □                                       |                                       |             |                      |                          |
| an          | 24       | and complete lines 24, 25, 29 and 30.  Net assets without donor restrictions               |                                       |             |                      |                          |
| Ba          | 24<br>25 | Net assets with donor restrictions   |                                       |             |                      |                          |
| Fund        | 23       | _  |                                       |             |                      |                          |
| Fu          |          | Foundations that do not follow FASB ASC 958, check here  and complete lines 26 through 30. |                                       |             |                      |                          |
| ٥           | 26       | Capital stock, trust principal, or current funds   | 17,675,430                            |             | 22,155,401           |                          |
| Assets      | 27       | Paid-in or capital surplus, or land, bldg., and equipment fund                             | 0                                     |             | 0                    |                          |
| 455         | 28       | Retained earnings, accumulated income, endowment, or other funds                           | 0                                     |             | 0                    |                          |
| Net /       | 29       | Total net assets or fund balances (see instructions)                                       | 17,675,430                            |             | 22,155,401           |                          |
| Ž           | 30       | Total liabilities and net assets/fund balances (see instructions) .                        | 17,675,430                            |             | 24,273,975           |                          |
| Pa          | rt III   | Analysis of Changes in Net Assets or Fund Balances   |                                       |             |                      |                          |
| 1           |          | l net assets or fund balances at beginning of year—Part II, column (a), line               |                                       | end-        |                      |                          |
| _           | •        | ear figure reported on prior year's return)  |                                       | •           | 1                    | 17,675,430               |
| 2<br>3      |          | er amount from Part I, line 27a  |                                       | •           | 3                    | 6,389,382<br>18,714      |
| 4           |          | er increases not included in line 2 (itemize)  |                                       |             | 4                    | 24,083,526               |
| 5           |          | reases not included in line 2 (itemize)  | · · · · · · · · · · · · · · · · · · · | •           | 5                    | 1,928,125                |
| 6           |          | I net assets or fund balances at end of year (line 4 minus line 5)—Part II,                | column (b), line 29                   |             | 6                    | 22,155,401               |
|             |          |  |                                       |             |                      | orm <b>990-PF</b> (2019) |

|  | pe the kind(s) of property sold (e.g.,<br>arehouse; or common stock, 200 sh   |   | (b) How acquired P—Purchase D—Donation  | (c) Date acquired (mo., day, yr.)                 | (d) Date sold (mo., day, yr.)                             |
|--|---|---|---|---|---|
| <b>1 a</b> GW & WADE #0374 - PU  | JBLICLY TRADED SECURITIES   |   | Р                                       |   |   |
| <b>b</b> GW & WADE #8510 - PU  | JBLICLY TRADED SECURITIES   |   | Р                                       |   |   |
| c JPM #7004 - PUBLICLY 1   | TRADED SECURITIES   |   | Р                                       |   |   |
| d JPM #3005 - PUBLICLY 1   | TRADED SECURITIES   |   | Р                                       |   |   |
| e CAPITAL GAINS DIVIDE   | NDS   |   | Р                                       |   |   |
| (-)  | (f)   |   | g)                                      | (   | h)  |
| <b>(e)</b><br>Gross sales price  | Depreciation allowed  |   | ther basis                              |   | or (loss)   |
| <u> </u>   | (or allowable)  | plus expe                               | nse of sale                             |   | minus (g)   |
|  | 37,963  |   | 438,325                                 | <del> </del>                                      | 49,63   |
| b1,17  | 70,320  |   | 1,139,507                               | '   | 30,81   |
| <b>c</b> 22,96   | 52,289  |   | 16,123,151                              |   | 6,839,13  |
| d  | 225   |   |   |   | 22.   |
| <b>e</b> 41  | 18,160  |   |   |   | 418,16  |
| Complete only for assets   | s showing gain in column (h) and ow   | ned by the foundation o                 | n 12/31/69                              |   | (I)   |
| (i)<br>F.M.V. as of 12/31/69   | (j)   | Excess                                  | <b>k)</b><br>of col. (i)<br>(j), if any | Gains (Col. (<br>col. (k), but not                | h) gain minus<br>less than -0-) <b>or</b><br>rom col.(h)) |
| a  |   |   |   |   | 49,63   |
| b  |   |   |   |   | 30,81   |
| c  |   |   |   |   | 6,839,13  |
| d  |   |   |   |   | 22.   |
| e  |   |   |   |   | 418,16  |
| If gain, also enter in Pa  | e or (net capital loss)  gain or (loss) as defined in sections art I, line 8, column (c) (see instructi               |   | art I, line 7                           | 2   | 7,337,974   |
| in Part I, line 8  Part V Qualification                                      |   | educed Tax on Net                       | · · · · }                               | come  | 6,919,814   |
| (For optional use by domestic parties, left section 4940(d)(2) applies, left | private foundations subject to the se   | ction 4940(a) tax on net                | : investment incon                      | ne.)  | es 🗸 No   |
| If "Yes," the foundation does n  | ot qualify under section 4940(e). Do<br>mount in each column for each year;   | not complete this part.                 | ·                                       |   | es <u> </u>   |
| (a) Base period years Calendar year (or tax year beginning in)               | <b>(b)</b><br>Adjusted qualifying distributions   | (c)<br>Net value of noncharitable       | e-use assets                            | ( <b>d)</b> Distribution rat (col. (b) divided by |   |
| 2018   | 1,007,802   |   | 20,685,047                              |   | 0.048721  |
| 2017   | 939,700   |   | 19,994,391                              |   | 0.046998  |
| 2016   | 938,160   |   | 18,541,990                              |   | 0.050597  |
| 2015   | 499,008   |   | 19,225,548                              |   | 0.025955  |
| 2014   | 552,950   |   | 15,816,322                              |   | 0.034961  |
| 2 Total of line 1, column (  | d)  |   | 2                                       |   | 0.207232  |
| number of years the four   | o for the 5-year base period—divide<br>ndation has been in existence if less<br>oncharitable-use assets for 2019 fror | the total on line 2 by 5.0 than 5 years |   |   | 0.041446<br>20,646,216                                    |
| <b>5</b> Multiply line 4 by line 3   |   |   | 5_                                      |   | 855,703   |
| 6 Enter 1% of net investm  | ent income (1% of Part I, line 27b)   |   | 6                                       |   | 76,281  |
| <b>7</b> Add lines 5 and 6   |   |   | 7                                       |   | 931,984   |
| 8 Enter qualifying distribut   | cions from Part XII, line 4 , eater than line 7, check the box in Pa  |   |   | ng a 1% tax rate. Se                              | 1,503,322<br>ee the Part VI                               |
| msu ucuons.  |   |   |   | F   | orm <b>990-PF</b> (2019                                   |

Page **6** 

| t VII-B    | Statements Regarding Activities for Which Form 4720 May Be Require              | <b>d</b> (continu | ed) |
|------------|---|-------------------|-----|
| During the | e year did the foundation pay or incur any amount to:                           |                   |     |
| (1) Carry  | on propaganda, or otherwise attempt to influence legislation (section 4945(e))? |                   |     |

|        | (-), ppg,  |              |   |                                      |             | ∟ Yes                          | ~        | No         |               |        |       |
|--------|--|--------------|---|--------------------------------------|-------------|--------------------------------|----------|------------|---------------|--------|-------|
|        | (2) Influence the outcome of any sp  |              |   |                                      |             |                                |          |            |               |        |       |
|        | on, directly or indirectly, any vo   |              |   |                                      |             | Yes                            | <b>✓</b> | No         |               |        |       |
|        | (3) Provide a grant to an individual for travel, study, or other similar purposes?  (4) Provide a grant to an appariation of the provided at t |              |   |                                      |             |                                |          |            |               |        |       |
|        | (4) Provide a grant to an organization other than a charitable, etc., organization described   |              |   |                                      |             |                                |          |            |               |        |       |
|        | in section 4945(d)(4)(A)? See instructions   |              |   |                                      |             |                                |          |            |               |        |       |
|        | (5) Provide for any purpose other t  |              |   | * **                                 |             |                                |          |            |               |        |       |
|        | educational purposes, or for the   | -            |   |                                      |             | , ∐ Yes                        | ✓        | No         |               |        |       |
| b      | If any answer is "Yes" to $5a(1)$ – $(5)$ ,  |              | =   |                                      |             | lescribed in                   |          |            |               |        |       |
|        | Regulations section 53.4945 or in a  |              |   |                                      |             |                                | •        |            | 5b            |        |       |
|        | Organizations relying on a current n   |              | -   |                                      |             | •                              |          |            |               |        |       |
| С      | If the answer is "Yes" to question 5a  | ` '.         |   | •                                    |             |                                |          |            |               |        |       |
|        | tax because it maintained expenditu  |              | -   |                                      |             | ☐ Yes                          |          | No         |               |        |       |
|        | If "Yes," attach the statement requi   | red b        | y Regulations section 53                    | .4945–5(d).                          |             |                                |          |            |               |        |       |
| 6a     | Did the foundation, during the year,   | rece         | ive any funds, directly o                   | r indirectly, to pay premi           | ums on      |                                |          |            |               |        |       |
|        | a personal benefit contract?   |              |   |                                      |             | Yes                            | ~        | No         |               |        |       |
| b      | Did the foundation, during the year,   | pay          | premiums, directly or inc                   | directly, on a personal be           | nefit contr | act?                           |          | 140        | 6b            |        | No    |
|        | If "Yes" to 6b, file Form 8870.  |              |   |                                      |             |                                |          |            |               |        |       |
| 7a     | At any time during the tax year, wa  | s the        | foundation a party to a                     | prohibited tax shelter tra           | nsaction?   | ☐ Yes                          | <b>✓</b> | Na         |               |        |       |
| b      | If "Yes", did the foundation receive   | any p        | roceeds or have any net                     | income attributable to the           | ne transact |                                |          | NO         | 7b            |        |       |
| 8      | Is the foundation subject to the sect  | tion 4       | 960 tax on payment(s)                       | of more than \$1,000,000             | in remune   | eration or                     |          |            |               |        |       |
|        | excess parachute payment during th   | ne ye        | ar?   |                                      |             | □ ,,                           | <b>✓</b> |            |               |        |       |
|        | Information About (  |              |   |                                      |             | ☐ Yes                          |          | No<br>nalo | V005          |        |       |
| Pai    | and Contractors  | JIIIC        | ers, Directors, Trus                        | tees, roundation Ma                  | anayers,    | nigiliy Pa                     | IU EII   | iipio      | yees,         |        |       |
|        |  |              |   | 1.1.1                                |             |                                |          |            |               |        |       |
| _1_    | List all officers, directors, trusted  |              |   |                                      |             |                                |          | 1          |               |        |       |
|        | (a) Name and address   | ١ '          | <b>b)</b> Title, and average hours per week | (c) Compensation (If not paid, enter |             | ontributions (<br>benefit plan |          |            | Expen         |        |       |
|        | (a) Hame and dual see  |              | devoted to position                         | -0-)                                 |             | d compensat                    |          | °          | ther al       | lowand | ces   |
| JEFF 3 | ORDAN  |              | CTOR  | C                                    |             |                                | 0        |            |               |        | (     |
|        | X 1707   | 0.00         |   |                                      |             |                                |          |            |               |        |       |
|        | LTOS, CA 94023   |              |   |                                      |             |                                |          | <u> </u>   |               |        |       |
|        | N SHISHINO JORDAN  | DIRE<br>0.00 | CTOR  | 0                                    |             |                                | 0        | 1          |               |        | (     |
|        | )X 1707<br>LTOS, CA 94023  |              |   |                                      |             |                                |          |            |               |        |       |
| 2      | Compensation of five highest-pa  | id en        | nployees (other than t                      | hose included on line                | 1—see ins   | tructions).                    | If no    | ne, ei     | nter "l       | NONE   | ."    |
|        |  |              |   |                                      | _           | Contributions                  |          |            |               |        |       |
| (a)    | Name and address of each employee  | paid         | (b) Title, and average hours per week       | (c) Compensation                     | èmp         | oloyee benefit                 | :        |            | Expens        |        |       |
|        | more than \$50,000   |              | devoted to position                         | (c) compensation                     |             | and deferre                    | d        | ot         | her all       | owanc  | es    |
| NON    | _  |              |   | +                                    |             | mpensation                     | -        |            |               |        |       |
| NON    |  |              |   |                                      |             |                                |          |            |               |        |       |
|        |  |              |   | +                                    |             |                                | +        |            |               |        |       |
|        |  |              |   |                                      |             |                                |          |            |               |        |       |
|        |  |              |   | -                                    |             |                                |          |            |               |        |       |
|        |  |              |   |                                      |             |                                |          |            |               |        |       |
|        |  |              |   |                                      |             |                                |          |            |               |        |       |
|        |  |              |   |                                      |             |                                |          |            |               |        |       |
|        |  |              |   | <u> </u>                             |             |                                |          |            |               |        |       |
| _      |  |              |   |                                      |             |                                |          |            |               |        |       |
|        |  |              |   |                                      |             |                                |          |            |               |        |       |
| Tota   | I number of other employees paid ov  | er \$5       | 0,000                                       |                                      | <del></del> | <b>&gt;</b>                    |          |            |               |        | (     |
|        | 1 , 1  |              |   |                                      |             |                                |          | For        | m <b>99</b> ( | )-PF   | (2019 |
|        |  |              |   |                                      |             |                                |          |            |               | - 1    | ,     |

| Form 990-PF (2019)   |                                       | Page <b>7</b>             |
|--|---------------------------------------|---------------------------|
| Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)   | Foundation Managers, Highly Pa        | aid Employees,            |
| 3 Five highest-paid independent contractors for professional servic  | es (see instructions). If none, enter | "NONE".                   |
| (a) Name and address of each person paid more than \$50,000  | (b) Type of service                   | (c) Compensation          |
| NONE   |                                       |                           |
|  |                                       |                           |
|  |                                       |                           |
|  |                                       |                           |
|  |                                       |                           |
| <b>Total</b> number of others receiving over \$50,000 for professional services  |                                       | • 0                       |
| Part IX-A Summary of Direct Charitable Activities  |                                       |                           |
| List the foundation's four largest direct charitable activities during the tax year. Include rele<br>organizations and other beneficiaries served, conferences convened, research papers produ |                                       | r of Expenses             |
| 1  |                                       |                           |
| 2  |                                       |                           |
|  |                                       |                           |
| 3  |                                       |                           |
|  |                                       |                           |
| 4  |                                       |                           |
| Part IX-B Summary of Program-Related Investments (see i  | nstructions)                          |                           |
| Describe the two largest program-related investments made by the foundation during the   | ·                                     | Amount                    |
| 1  | ,                                     |                           |
|  |                                       |                           |
| 2  |                                       |                           |
| All other program-related investments. See instructions.   |                                       |                           |
| 3  |                                       |                           |
| Total. Add lines 1 through 3   |                                       | • o                       |
| Total Add Mico Landagn 5   |                                       | Form <b>990-PF</b> (2019) |

3

4

5

6

7

1a

1b

2

3a 3b

4

5

956,030

956.030

956.030

1,503,322

1,503,322

1,427,041

Form **990-PF** (2019)

76,281

Distributable amount before adjustments. Subtract line 2c from line 1. . . . . . . . . . . . . . . .

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . . . . . . . . .

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

income. Enter 1% of Part I, line 27b. See instructions.

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

3

4 5

6

1

2

3

4

5

b

Part XII

**5** Excess distributions carryover applied to 2019. (If an amount appears in column (d), the

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5
b Prior years' undistributed income. Subtract line 4b from line 2b.
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.
d Subtract line 6c from line 6b. Taxable amount—see instructions.
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions.
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020.

6 Enter the net total of each column as

7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).
 8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).

**9 Excess distributions carryover to 2020.** Subtract lines 7 and 8 from line 6a . . .

Analysis of line 9:
Excess from 2015.
Excess from 2016.
Excess from 2017.
Excess from 2018.
Excess from 2019.

indicated below:

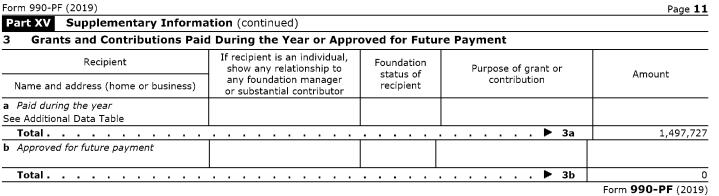
same amount must be shown in column (a).)

| Pa  | rt XIIII Undistributed Income (see instruc  | ctions)       |                            |             | <u></u> _          |
|-----|---|---------------|----------------------------|-------------|--------------------|
|     | (   | (a)<br>Corpus | (b)<br>Years prior to 2018 | (c)<br>2018 | <b>(d)</b><br>2019 |
| 1   | Distributable amount for 2019 from Part XI, line 7                                  |               |                            |             | 956,030            |
| 2   | Undistributed income, if any, as of the end of 2019:                                |               |                            |             |                    |
| а   | Enter amount for 2018 only  |               |                            | 983,769     |                    |
| b   | Total for prior years: 20, 20, 20   |               | 0                          |             |                    |
|     | Excess distributions carryover, if any, to 2019:                                    |               |                            |             |                    |
|     | From 2014   |               |                            |             |                    |
|     | From 2015   |               |                            |             |                    |
|     | From 2016   |               |                            |             |                    |
|     | From 2017   |               |                            |             |                    |
|     | From 2018   |               |                            |             |                    |
|     | Total of lines 3a through e   | 0             |                            |             | _                  |
|     | Qualifying distributions for 2019 from Part   |               |                            |             |                    |
|     | XII, line 4: • \$ 1,503,322   |               |                            | 002.760     |                    |
|     | Applied to 2018, but not more than line 2a  |               | _                          | 983,769     |                    |
|     | Applied to undistributed income of prior years (Election required—see instructions) |               | 0                          |             |                    |
| c · | Treated as distributions out of corpus (Election                                    | 0             |                            |             |                    |
|     | required—see instructions)  |               |                            |             | E10 EE3            |
|     | Applied to 2019 distributable amount  |               |                            |             | 519,553            |
| е   | Remaining amount distributed out of corpus  | 0             |                            |             |                    |

Page 9

436,477

Form **990-PF** (2019)



| Program service revenue:  Business code Amount Exclusion code Amount (See instructions.)  For Exclusion code and Exclu | ter gross                    | amounts unless otherwise indicated.  | Unrelated b                              | usiness income                     | Excluded by section              | 512, 513, or 514  | (e)<br>Related or exempt               |
|--|------------------------------|--|--|------------------------------------|----------------------------------|-------------------|--|
| b  | -                            |  |  | <b>(b)</b><br>Amount               | (c)<br>Exclusion code            |                   | function income<br>(See instructions.) |
| d d e f g Fees and contracts from government agencies  Membership dues and assessments.  Interest on savings and temporary cash investments  Dividends and interest from securities.  Dividends and securities.  |                              |  |  |                                    |                                  |                   |  |
| g Fees and contracts from government agencies  Membership dues and assessments.  Interest on savings and temporary cash investments  |                              |  |  |                                    |                                  |                   |  |
| g Fees and contracts from government agencies  Membership dues and assessments   |                              |  |  |                                    |                                  |                   |  |
| g Fees and contracts from government agencies  Membership dues and assessments.  Interest on savings and temporary cash investments  Dividends and interest from securities.  Dividends and interest from |                              |  |  |                                    |                                  |                   |  |
| Membership dues and assessments.  Interest on savings and temporary cash investments  Dividends and interest from securities.  Net rental income or (loss) from real estate: a Debt-financed property. b Not debt-financed property.  Net rental income or (loss) from personal property Other investment income.  Gain or (loss) from sales of assets other than inventory  Net income or (loss) from special events: Gross profit or (loss) from sales of inventory Other revenue: a  b  c  d  e  Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  Substantial income or (e) feather than income.  Substantial income or (loss) from sales of inventory Other revenue: a  b  C  Relationship of Activities to the Accomplishment of Exempt Purposes  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See   |                              |  |  |                                    |                                  |                   |  |
| Interest on savings and temporary cash investments   | _                            |  |  |                                    |                                  |                   |  |
| Dividends and interest from securities   | Interes                      | t on savings and temporary cash  |  |                                    |                                  |                   |  |
| Net rental income or (loss) from real estate:  a Debt-financed property  | Dividen                      |  |  |                                    | 14                               | 359,774           |  |
| b Not debt-financed property   |                              |  |  |                                    |                                  | ·                 |  |
| Net rental income or (loss) from personal property Other investment income   |                              |  |  |                                    |                                  |                   |  |
| Other investment income  |                              |  |  |                                    |                                  |                   |  |
| Gain or (loss) from sales of assets other than inventory   |                              |  |  |                                    | 14                               | 32                |  |
| Net income or (loss) from special events:  Gross profit or (loss) from sales of inventory Other revenue: a  b  c  d  e  Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculations.)  Total Relationship of Activities to the Accomplishment of Exempt Purposes  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See   |                              |  |  |                                    | 1-7                              | 32                |  |
| Gross profit or (loss) from sales of inventory Other revenue: a  b  c  d  e  Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculations.)  art XVI-B  Relationship of Activities to the Accomplishment of Exempt Purposes  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See   |                              | • •  |  |                                    | 18                               | 5,126,255         |  |
| Other revenue: a   | Net inc                      | ome or (loss) from special events:   |  |                                    |                                  |                   |  |
| b c d d d d d d d d d d d d d d d d d d  |                              |  |  |                                    |                                  |                   |  |
| c  | Other r                      | evenue: <b>a</b>   |  |                                    |                                  |                   |  |
| Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculations.)  Relationship of Activities to the Accomplishment of Exempt Purposes  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See   |                              |  |  |                                    |                                  |                   |  |
| Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculations.)  Relationship of Activities to the Accomplishment of Exempt Purposes  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See   |                              |  |  |                                    |                                  |                   |  |
| (See worksheet in line 13 instructions to verify calculations.)  art XVI-B  Relationship of Activities to the Accomplishment of Exempt Purposes  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See  |                              |  |  |                                    |                                  |                   |  |
| (See worksheet in line 13 instructions to verify calculations.)  art XVI-B  Relationship of Activities to the Accomplishment of Exempt Purposes  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See  |                              |  |  |                                    |                                  |                   |  |
| Relationship of Activities to the Accomplishment of Exempt Purposes  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See  | Subtota                      | al. Add columns (b), (d), and (e)  |  | 0                                  |                                  | 5,486,061         | (                                      |
| Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See   |                              |  |  |                                    | 13                               |                   |  |
|  | (See wo                      | orksheet in line 13 instructions to verify calcu   | lations.)                                |                                    |                                  |                   | 5,486,061                              |
|  | (See wo<br>art XVI<br>ne No. | rksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations.)  e Accomplisi income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | ed importantly to |  |
|  | (See wo<br>art XVI<br>ne No. | rksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations.)  e Accomplisi income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | ed importantly to |  |
|  | (See wo<br>art XVI<br>ne No. | rksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations.)  e Accomplisi income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | ed importantly to |  |
|  | (See wo<br>art XVI<br>ne No. | rksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations.)  e Accomplisi income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | ed importantly to |  |
|  | (See wo<br>art XVI<br>ne No. | rksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations.)  e Accomplisi income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | ed importantly to |  |
|  | (See wo<br>art XVI<br>ne No. | rksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations.)  e Accomplisi income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | ed importantly to |  |
|  | (See wo<br>irt XVI<br>ne No. | rksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations.)  e Accomplisi income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | ed importantly to |  |
|  | (See wo<br>art XVI<br>ne No. | rksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations.)  e Accomplisi income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | ed importantly to |  |
|  | (See wo<br>art XVI<br>ne No. | rksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations.)  e Accomplisi income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | ed importantly to |  |
|  | (See wo<br>irt XVI<br>ne No. | rksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations.)  e Accomplisi income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | ed importantly to |  |
|  | (See wo<br>irt XVI<br>ne No. | rksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations.)  e Accomplisi income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | ed importantly to |  |
|  | (See wo<br>art XVI<br>ne No. | rksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations.)  e Accomplisi income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | ed importantly to |  |
|  | (See wo<br>irt XVI<br>ne No. | rksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations.)  e Accomplisi income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | ed importantly to |  |
|  | (See wo<br>art XVI<br>ne No. | rksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations.)  e Accomplisi income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | ed importantly to |  |
|  | (See wo<br>art XVI<br>ne No. | rksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations.)  e Accomplisi income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | ed importantly to |  |
|  | (See wo<br>irt XVI<br>ne No. | rksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations.)  e Accomplisi income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | ed importantly to |  |
|  | (See wo<br>art XVI<br>ne No. | rksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations.)  e Accomplisi income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | ed importantly to |  |
|  | (See wo<br>irt XVI<br>ne No. | rksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations.)  e Accomplisi income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | ed importantly to |  |
|  | (See wo<br>Irt XVI<br>1e No. | rksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations.)  e Accomplisi income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | ed importantly to |  |
|  | (See wo<br>art XVI<br>ne No. | rksheet in line 13 instructions to verify calcu  Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex | lations.)  e Accomplisi income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | ed importantly to |  |

| Part XVII     | Information Regarding Transfers To and Transactions and Relationships With Noncharitable<br>Exempt Organizations    |   |
|---------------|---|---|
| Did the organ | sization directly or indirectly engage in any of the following with any other organization described in section 501 | Т |

|                  |                    | - Exempl Organia   | 2auvii3                      |                |                        |                                     |                           |                          |  |  |         |                 |
|------------------|--------------------|--|------------------------------|----------------|------------------------|-------------------------------------|---------------------------|--------------------------|--|--|---------|-----------------|
|                  |                    | ganization directly or in-<br>than section 501(c)(3)                             |                              |                |                        |                                     |                           |                          |  | ion 501  | Yes     | No              |
| ( )              | `                  | from the reporting foun  | -                            | ,              |                        | , ,                                 | '                         | garnzacion               | 13:  |  | +       | + ***           |
|                  |                    |  |                              |                |                        |                                     |                           |                          |  | . 1a(  | ւ)      | No              |
| (2) Other assets |                    |  |                              |                |                        |                                     |                           |                          |  | 1a(  | 2)      | No              |
|                  |                    | sactions:  |                              |                |                        |                                     |                           |                          |  |  |         |                 |
|                  |                    | of assets to a nonchari  | •                            | _              |                        |                                     |                           |                          |  | 1b(  |         | No              |
|                  |                    | ases of assets from a n  |                              |                |                        |                                     |                           |                          |  | 1b(  |         | No<br>No        |
|                  |                    | al of facilities, equipmer<br>bursement arrangemen                               | -                            |                |                        |                                     |                           |                          |  | 1b(  |         | No              |
|                  |                    | s or loan guarantees.  |                              |                |                        |                                     |                           |                          |  | 1b(  |         | No              |
|                  |                    | mance of services or m   |                              |                |                        |                                     |                           |                          |  | . 1b(  | _       | No              |
| <b>c</b> Sha     | ring of            | facilities, equipment, n   | nailing lists, o             | other .        | assets, or             | paid employees                      | s                         |                          |  | . 10   |         | No              |
| of tl<br>in a    | ne good<br>ny tran | ver to any of the above<br>ds, other assets, or ser-<br>nsaction or sharing arra | vices given b<br>ngement, sh | y the<br>ow in | reporting<br>column (d | foundation. If t<br>i) the value of | he foundati<br>the goods, | on receive<br>other asse | ed less than fair mai<br>ets, or services rece | rket value<br>ived.                            |         |                 |
| a) Line          | NO.                | (b) Amount involved  | (c) Name or                  | noncna         | aritable exel          | mpt organization                    | (a) De                    | escription of            | transfers, transactions                        | s, and snaring a                               | rangem  | ents            |
|                  |                    |  |                              |                |                        |                                     |                           |                          |  |  |         |                 |
|                  |                    |  |                              |                |                        |                                     |                           |                          |  |  |         |                 |
|                  |                    |  |                              |                |                        |                                     |                           |                          |  |  |         |                 |
|                  | _                  |  |                              |                |                        |                                     |                           |                          |  |  |         |                 |
|                  | +                  |  |                              |                |                        |                                     |                           |                          |  |  |         |                 |
|                  |                    |  |                              |                |                        |                                     | 1                         |                          |  |  |         |                 |
|                  |                    |  |                              |                |                        |                                     |                           |                          |  |  |         |                 |
|                  |                    |  |                              |                |                        |                                     | -                         |                          |  |  |         |                 |
|                  |                    |  |                              |                |                        |                                     |                           |                          |  |  |         |                 |
|                  |                    |  |                              |                |                        |                                     | 1                         |                          |  |  |         |                 |
|                  |                    |  |                              |                |                        |                                     |                           |                          |  |  |         |                 |
|                  |                    |  |                              |                |                        |                                     |                           |                          |  |  |         |                 |
|                  |                    |  |                              |                |                        |                                     | <u> </u>                  |                          |  |  |         |                 |
|                  |                    | ndation directly or indire<br>in section 501(c) (other                           | •                            |                | •                      |                                     |                           |                          | _  | ′es 🔽 No                                       |         |                 |
| <b>b</b> If "\   | es," co            | omplete the following so<br>(a) Name of organization                             |                              |                | ( t                    | ) Type of organiz                   | ation                     | 1                        | (c) Description                                | n of relationship                              |         |                 |
|                  |                    |  |                              |                |                        |                                     |                           |                          |  |  |         |                 |
|                  |                    |  |                              |                |                        |                                     |                           |                          |  |  |         |                 |
|                  |                    |  |                              |                |                        |                                     |                           |                          |  |  |         |                 |
|                  |                    |  |                              |                |                        |                                     |                           |                          |  |  |         |                 |
|                  | of m               | er penalties of perjury,<br>y knowledge and belief<br>h preparer has any kno     | , it is true, co             |                |                        |                                     |                           |                          |  |  |         |                 |
| Sign<br>Here     | *                  | *****  |                              |                |                        | 2020-11-09                          | <b></b>                   | *****                    |  | May the IRS<br>return<br>with the pre<br>below |         |                 |
|                  | <b>'</b>           | Signature of officer or to   | rustee                       |                |                        | Date                                | ,                         | Title                    |  | (see instr.)                                   | ✓ Yes   | □ <sub>No</sub> |
|                  | l .                | Print/Type preparer's  | name                         | Prep           | arer's Sigr            | nature                              | Date                      |                          |  | PTIN   |         |                 |
|                  |                    |  |                              |                |                        |                                     |                           |                          | Check if self-                                 | P003   | 59548   |                 |
| ٦-: -            |                    | ANNE F MACDONA   | LD                           |                |                        |                                     | 202                       | 0-11-09                  | employed ▶ ☐                                   |  |         |                 |
| Paid             | 3r0r               |  |                              |                |                        |                                     |                           |                          |  |  |         |                 |
| rep<br>Ise (     | arer<br>Only       |  | NK RIMERMA                   | N & C          | O LLP                  |                                     |                           |                          |  | Firm's EIN ▶                                   | 94-134: | 1042            |
| ,3C (            | Jilly              |  | 01 PAGE MIL                  | L ROA          | 4D                     |                                     |                           |                          |  |  |         |                 |
|                  |                    | DA   |                              | 0/12           | 04                     |                                     |                           |                          |  | Phone no. (6                                   | 50) 845 | -8100           |
|                  |                    |  | LO ALTO, CA                  |                |                        |                                     |                           |                          |  |  |         |                 |
|                  |                    |  |                              |                |                        |                                     |                           |                          |  | Earn C   | OO_DE   | /2010           |

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

JEFF JORDAN

KAREN SHISHINO JORDAN

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year   |                      |                 |       |
|--|----------------------|-----------------|-------|
| AMERICAN FOUNDATION FOR SUICIDE<br>PREVENTION<br>199 WATER ST 11TH FLOOR | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 1,500 |

| 199 WATER ST 11TH FLOOR<br>NEW YORK, NY 10038   |                      |                 |        |
|---|----------------------|-----------------|--------|
| AMHERST COLLEGEPO BOX 5000<br>AMHERST, MA 01002 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 10,000 |

| AMHERST COLLEGEPO BOX 5000<br>AMHERST, MA 01002        | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 10,000 |
|--|----------------------|-----------------|--------|
| BAWSI1922 THE ALAMDEDA SUITE 420<br>SAN JOSE, CA 95126 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 1,000  |

| · · · · · · · · · · · · · · · · · · · |           |                 |       |
|---------------------------------------|-----------|-----------------|-------|
| AWSI1922 THE ALAMDEDA SUITE 420       | 501(C)(3) | GENERAL PURPOSE | 1,000 |
| AN 10CE CA 05126                      | CHARITY   |                 | ·     |

1,497,727

■ 3a

| WOITSEE THE KENTIDEDIK SOTTE TEO | II . |         | CENTER OF TOTAL COSE | 1,00 |
|----------------------------------|------|---------|----------------------|------|
| AN JOSE, CA 95126                |      | CHARITY |                      |      |
|                                  |      |         |                      |      |

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

recipient

501(C)(3)

CHARITY

GENERAL PURPOSE

▶ 3a

2,500

1,497,727

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

any foundation manager

or substantial contributor

Name and address (home or business)

CENTER FOR DISASTER PHILANTHROPY

ONE THOMAS CIRCLE NW SUITE 700

WASHINGTON, DC 20005

Total .

| a Paid during the year  |                      |                 |        |
|---|----------------------|-----------------|--------|
| BOYS AND GIRLS CLUBS OF THE<br>PENINSULA<br>401 PIERCE ROAD<br>MENLO PARK, CA 94025 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 50,000 |
| CARB DM809-B CUESTA DRIVE 193<br>MOUNTAIN VIEW, CA 94040                            | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 10,000 |
|   | 1                    |                 |        |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

|  | or substantial contributor |                      |                 |       |
|--|----------------------------|----------------------|-----------------|-------|
| a Paid during the year                             |                            |                      |                 |       |
| CLEAN AIR TASK FORCE<br>114 STATE STREET 6TH FLOOR |                            | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 2,500 |

| BOSTON, MA 02109  | CHARTT               |                 |       |
|---|----------------------|-----------------|-------|
| COMMUNITY WORKS WEST<br>110 BROADWAY<br>OAKLAND, CA 94607 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 5,000 |
|   |                      |                 |       |

| COMMUNITY WORKS WEST<br>110 BROADWAY<br>OAKLAND, CA 94607   | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 5,000 |
|---|----------------------|-----------------|-------|
| DOLORES STREET COMMUNITY<br>SERVICES<br>928 VALENCIA STREET | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 2,500 |

| DOLORES STREET COMMUNITY<br>SERVICES<br>928 VALENCIA STREET<br>SAN FRANCISCO, CA 94110 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 2,500 |
|--|----------------------|-----------------|-------|
| OAKLAND, CA 94607  | CHARITY              |                 |       |

| DOLORES STREET COMMUNITY<br>SERVICES<br>928 VALENCIA STREET<br>SAN FRANCISCO, CA 94110 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 2,500     |
|--|----------------------|-----------------|-----------|
| Total  | <br>                 | <b>&gt;</b> 3a  | 1,497,727 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

recipient

any foundation manager

or substantial contributor

Name and address (home or business)

SAN FRANCISCO, CA 94103

Total .

| a Paid during the year  |                      |                 |       |
|---|----------------------|-----------------|-------|
| ECUMENICAL HUNGER PROGRAM<br>2411 PULGAS AVENUE<br>EAST PALO ALTO, CA 94303 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 1,000 |
| GREATER GOOD SCIENCE CENTER   | 501(C)(3)            | GENERAL PURPOSE | 5,000 |

| ENSTTREE RETO, CR 51303   |                      |                 |       |
|---|----------------------|-----------------|-------|
| GREATER GOOD SCIENCE CENTER<br>UNIVERSITY OF CALIFORNIA BERKELEY<br>MC 6070<br>BERKELEY, CA 94720 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 5,000 |
|   | l                    |                 |       |

CHARITY

▶ 3a

1,497,727

| GREATER GOOD SCIENCE CENTER<br>UNIVERSITY OF CALIFORNIA BERKELEY<br>MC 6070<br>BERKELEY, CA 94720 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 5,000 |
|---|----------------------|-----------------|-------|
| HAMILTON FAMILIES273 9TH STREET   | 501(C)(3)            | GENERAL PURPOSE | 2,500 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business)

| (101110 0110 0110 01 20011000) | or substantial contributor |           |                 |       |
|--------------------------------|----------------------------|-----------|-----------------|-------|
| a Paid during the year         |                            |           |                 |       |
| HUMAN RIGHTS WATCH             |                            | 501(C)(3) | GENERAL PURPOSE | 1,000 |

| 350 FIFTH AVENUE 34TH FLOOR<br>NEW YORK, NY 10118 | CHARITY              |                 | 2,111 |
|---|----------------------|-----------------|-------|
| HUMANE SOCIETY SILICON VALLEY<br>901 AMES AVENUE  | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 1,000 |

| NEW TOTAL, IVI 10110   |                      |                 |         |
|--|----------------------|-----------------|---------|
| HUMANE SOCIETY SILICON VALLEY<br>901 AMES AVENUE<br>MILPITAS, CA 95035 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 1,000   |
| JUVENILE DIABETES RESEARCH   | 501(C)(3)            | GENERAL PURPOSE | 635,260 |

| 901 AMES AVENUE<br>MILPITAS, CA 95035                           | CHARITY              | GENERAL FORFOSE | 1,000   |
|---|----------------------|-----------------|---------|
| JUVENILE DIABETES RESEARCH<br>FOUNDATION<br>26 BROADWAY 14TH FL | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 635,260 |

| MILPITAS, CA 95035  | CHARITY              |                 |         |
|---|----------------------|-----------------|---------|
| JUVENILE DIABETES RESEARCH<br>FOUNDATION<br>26 BROADWAY 14TH FL<br>NEW YORK, NY 10004 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 635,260 |

| JUVENILE DIABETES RESEARCH<br>FOUNDATION<br>26 BROADWAY 14TH FL<br>NEW YORK, NY 10004 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 635,260   |
|---|----------------------|-----------------|-----------|
| Total   | <br>                 | ▶ 3a            | 1,497,727 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of

any foundation manager

Name and address (home or business)

Total .

| or substantial contributor |                            |                 |                           |
|----------------------------|----------------------------|-----------------|---------------------------|
|                            |                            |                 |                           |
|                            | 501(C)(3)<br>CHARITY       | GENERAL PURPOSE | 1,000                     |
|                            | or substantial contributor | 501(C)(3)       | 501(C)(3) GENERAL PURPOSE |

recipient

▶ 3a

1,497,727

| LICK-WILMERDING HIGH SCHOOL<br>755 OCEAN AVENUE<br>SAN FRANCISCO, CA 94112 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 5,000 |
|--|----------------------|-----------------|-------|
| MEMORIAL SLOAN KETTERING CANCER  | 501(C)(3)            | GENERAL PURPOSE | 5,000 |

| SAN FRANCISCO, CA 94112   |                      |                 |       |
|---|----------------------|-----------------|-------|
| MEMORIAL SLOAN KETTERING CANCER<br>CENTER (MSKCC)<br>1275 YORK AVENUE | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 5,000 |

| SANTRANCISCO, CA 94112                            |                      |                 |      |
|---|----------------------|-----------------|------|
| MEMORIAL SLOAN KETTERING CANCER<br>CENTER (MSKCC) | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 5,00 |
| 1275 YORK AVENUE                                  |                      |                 |      |
| NEW YORK, NY 10065                                |                      |                 | 1    |

| MEMORIAL SLOAN KETTERING CANCER | [ 501(C)(3) | GENERAL PURPOSE | 5,0 |
|---------------------------------|-------------|-----------------|-----|
| CENTER (MSKCC)                  | CHARITY     |                 |     |
| 1275 YORK AVENUE                |             |                 |     |
| NEW YORK, NY 10065              |             |                 |     |
|                                 |             |                 |     |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager raciniant

| Name and address (home or business) | or substantial contributor | recipient |                 |       |
|-------------------------------------|----------------------------|-----------|-----------------|-------|
| a Paid during the year              |                            |           |                 |       |
| NAMI CALIFORNIA                     |                            | 501(C)(3) | GENERAL PURPOSE | 1 000 |

| 1851 HERITAGE LANE STE 150<br>SACRAMENTO, CA 95815 | CHARITY   | SENERAL FOR SSE | 1,000 |
|--|-----------|-----------------|-------|
| NRDC40 W 20TH STREET                               | 501(C)(3) | GENERAL PURPOSE | 2,500 |

| SACIONI ENTO, CA SSOIS                     |                      |                 |       |
|--|----------------------|-----------------|-------|
| NRDC40 W 20TH STREET<br>NEW YORK, NY 10011 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 2,500 |
| OPPORTUNITY FUND                           | 501(C)(3)            | GENERAL PURPOSE | 50    |

| NEW YORK, NY 10011   | CHARÍTY              |                 | ,  |
|--|----------------------|-----------------|----|
| OPPORTUNITY FUND<br>111 W ST JOHN ST 800<br>SAN JOSE, CA 95113 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 50 |

| OPPORTUNITY FUND<br>111 W ST JOHN ST 800<br>SAN JOSE, CA 95113 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE |  |
|--|----------------------|-----------------|--|

| SAN JOSE, CA 95113 |      |           |
|--------------------|------|-----------|
| Total              | ▶ 3a | 1,497,727 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of

| Name and address (home or business) | any foundation manager<br>or substantial contributor | recipient |                 |       |
|-------------------------------------|--|-----------|-----------------|-------|
| a Paid during the year              |  |           |                 |       |
| PACIFIC INSTITUTE                   |  | 501(C)(3) | GENERAL PURPOSE | 1,000 |

| 654 13TH STREET PRESERVATION PARK<br>OAKLAND, CA 94612 | CHARITY   |                 | ,   |
|--|-----------|-----------------|-----|
| PANDEMONIUM AVIARIESPO BOX 240                         | 501(C)(3) | GENERAL PURPOSE | 500 |

| OAKLAND, CA 94612                                     |                      |                 |      |
|---|----------------------|-----------------|------|
| PANDEMONIUM AVIARIESPO BOX 240<br>LOS ALTOS, CA 94024 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 50   |
| DARTNERS ASIA   | 501(C)(3)            | GENERAL DURDOSE | 1 00 |

| LOS ALTOS, CA 94024                                      | CHARITY              | SENEROLE FOR OSE | 300   |
|--|----------------------|------------------|-------|
| PARTNERS ASIA 436 14TH STREET SUITE 700 OAKLAND CA 94612 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE  | 1,000 |

| PARTNERS ASIA<br>436 14TH STREET SUITE 700<br>OAKLAND, CA 94612 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 1,000 |
|---|----------------------|-----------------|-------|

| PARTNERS ASIA<br>436 14TH STREET SUITE 700<br>OAKLAND, CA 94612 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 1,0       |
|---|----------------------|-----------------|-----------|
| Total   | <br>                 | ▶ 3a            | 1,497,727 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

| 1200 NEW HAMPSHIRE NW SUITE 875 CHARITY | a Paid during the year |         |                 |        |
|---|------------------------|---------|-----------------|--------|
| WASHINGTON, DC 20036                    |                        | ` ' ' ' | GENERAL PURPOSE | 50,000 |

| ·  |                      |                 |       |
|--|----------------------|-----------------|-------|
| PORTOLA VALLEY SCHOOLS<br>FOUNDATION<br>4575 ALPINE ROAD<br>PORTOLA VALLEY, CA 94028 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 1,000 |
| POSITIVE COACHING ALLIANCE   | 501(C)(3)            | GENERAL PURPOSE | 1 000 |

| 4575 ALPINE ROAD<br>PORTOLA VALLEY, CA 94028   | CHAN           |      |       |
|--|----------------|------|-------|
| POSITIVE COACHING ALLIANCE<br>1001 N RENGSTORFF AVE SUITE 100<br>MOUNTAIN VIEW, CA 94043 | 501(C<br>CHARI | '` ' | 1,000 |

| Total  | <br>                 | ▶ 3a            | 1,497,727 |
|--|----------------------|-----------------|-----------|
| POSITIVE COACHING ALLIANCE<br>1001 N RENGSTORFF AVE SUITE 100<br>MOUNTAIN VIEW, CA 94043 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 1,000     |
| PORTOLA VALLEY, CA 94028   |                      |                 |           |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of

any foundation manager

| Name and address (home or business)               | or substantial contributor | recipient            |                 |         |
|---|----------------------------|----------------------|-----------------|---------|
| a Paid during the year                            |                            |                      |                 |         |
| SECOND HARVEST FOOD BANK<br>4001 NORTH 1ST STREET |                            | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 100,000 |

recipient

| SAN JOSE, CA 95134   | CHARITY              |                 |     |
|--|----------------------|-----------------|-----|
| STANFORD ALUMNI ASSOCIATION<br>326 GALVEZ STREET<br>STANFORD, CA 94305 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 500 |

| STANFORD ALUMNI ASSOCIATION<br>326 GALVEZ STREET<br>STANFORD, CA 94305 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 500     |
|--|----------------------|-----------------|---------|
| STANFORD UNIVERSITY<br>450 SERRA MALL<br>STANFORD, CA 94305            | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 250,000 |

| Total   | <br>                 | ▶ 3a            | 1.497.727 |
|---|----------------------|-----------------|-----------|
| STANFORD UNIVERSITY<br>450 SERRA MALL<br>STANFORD, CA 94305 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 250,000   |
| STANFORD, CA 94305  |                      |                 |           |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

recipient

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

any foundation manager

or substantial contributor

Name and address (home or business)

| a Paid during the year                               |                      |                 |       |
|--|----------------------|-----------------|-------|
| SUMMER SEARCHPO BOX 39000<br>SAN FRANCISCO, CA 94139 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 1,000 |
| THE DIATRIBE FOUNDATION                              | 501(C)(3)            | GENERAL PURPOSE | 5,000 |

| THE DIATRIBE FOUNDATION<br>304 HAIGHT STREET<br>SAN FRANCISCO, CA 94117 | CHARITY              | GENERAL PURPOSE |  |
|---|----------------------|-----------------|--|
| THE LELAND STANFORD JUNIOR JNIVERSITY                                   | 501(C)(3)<br>CHARITY | GENERAL PURPOSE |  |

| 804 HAIGHT STREET<br>SAN FRANCISCO, CA 94117                  | CHARÍTY             | ŕ      |
|---|---------------------|--------|
| THE LELAND STANFORD JUNIOR<br>UNIVERSITY<br>326 GALVEZ STREET | 501(C)(3<br>CHARITY | 166,60 |

| SAN FRANCISCO, CA 94117   |                      |                 |         |
|---|----------------------|-----------------|---------|
| THE LELAND STANFORD JUNIOR<br>UNIVERSITY<br>326 GALVEZ STREET<br>STANFORD, CA 94305 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 166,667 |

| UNIVERSITY<br>326 GALVEZ STREET<br>STANFORD, CA 94305 | CHARÍTY |                | ,         |
|---|---------|----------------|-----------|
| Total   | <br>    | <b>&gt;</b> 3a | 1,497,727 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year  |                      |                 |       |
|---|----------------------|-----------------|-------|
| THE NATIONAL MS SOCIETY<br>733 THIRD AVENUE<br>NEW YORK, NY 10017 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 1,000 |

| 733 THIRD AVENUE<br>NEW YORK, NY 10017                                      | CHARITY              |                 |        |
|---|----------------------|-----------------|--------|
| UCLA SCHOLARSHIP<br>10920 WILSHIRE BLVD SUITE 1400<br>LOS ANGELAS, CA 90024 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 50,000 |
|   |                      |                 |        |

| 10920 WILSHIRE BLVD SUITE 1400<br>LOS ANGELAS, CA 90024 | CHARITY   | GENERAL FORFOSE | 30,000  |
|---|-----------|-----------------|---------|
| UCSF FOUNDATIONPO BOX 45339                             | 501(C)(3) | GENERAL PURPOSE | 100,000 |

| LOS ANGELAS, CA 90024                                  |                      |                 |         |
|--|----------------------|-----------------|---------|
| UCSF FOUNDATIONPO BOX 45339<br>SAN FRANCISCO, CA 94145 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 100,000 |

1,497,727

■ 3a

Total .

Recipient Foundation Purpose of grant or If recipient is an individual, Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business)

or substantial contributor

Total.

| a Paid during the year   |                      |                 |        |
|--|----------------------|-----------------|--------|
| UNITED STATES OLYMPIC AND PARALYMPIC FOUNDATION 1 OLYMPIC PLAZA COLORADO SPRINGS, CO 80909 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 18,750 |

| 1 OLYMPIC PLAZA<br>COLORADO SPRINGS, CO 80909                         |                      |                 |       |
|---|----------------------|-----------------|-------|
| UNIVERSITY OF CALIFORNIA BERKELEY<br>1995 UNIVERSITY AVENUE SUITE 400 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 5,000 |

| COLORADO SPRINGS, CO 80909  |                      |                 |       |
|---|----------------------|-----------------|-------|
| UNIVERSITY OF CALIFORNIA BERKELEY<br>1995 UNIVERSITY AVENUE SUITE 400 | 501(C)(3)<br>CHARITY | GENERAL PURPOSE | 5,000 |
| BERKELEY, CA 94704  |                      |                 |       |

1,497,727

| efile GRAPHIC print - DO NOT P   | ROCESS As Filed D      | ata -                    | DI                     | N: 93491316012590                           |  |  |  |
|----------------------------------|------------------------|--------------------------|------------------------|---|--|--|--|
| TY 2019 Accounting Fees Schedule |                        |                          |                        |   |  |  |  |
|                                  |                        |                          |                        |   |  |  |  |
|                                  | Name: THE FAT          | TIRE FOUNDATION          |                        |   |  |  |  |
|                                  | <b>EIN:</b> 20-8066058 |                          |                        |   |  |  |  |
| Category                         | Amount                 | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements<br>for Charitable<br>Purposes |  |  |  |
| ACCOUNTING FEES                  | 5,595                  | 0                        | 0                      | 5,595                                       |  |  |  |

| efile GRAPHIC print - DO NOT PROCESS         | As Filed Data - | DLN: 93491316012590 |  |  |  |  |  |  |
|--|-----------------|---------------------|--|--|--|--|--|--|
|  |                 |                     |  |  |  |  |  |  |
| TY 2019 Investments Corporate Stock Schedule |                 |                     |  |  |  |  |  |  |
|  |                 |                     |  |  |  |  |  |  |

## Name: THE FAT TIRE FOUNDATION

| EIN:                                   | 20-8066058 |  |
|--|------------|--|
| Investments Corporation Stock Schedule |            |  |
|  |            |  |

Name of Stock

JPM #3005

JPM #7004

Value

End of Year Book

620,938

22,843,585

**End of Year Fair** 

Market Value 620,938

22,843,585

As Filed Data -

Name: THE FAT TIRE FOUNDATION

Other Assets Schedule

INTEREST RECEIVABLE

**EIN:** 20-8066058

Description

End of Year - Book

Value

992

Beginning of Year -

**Book Value** 

DLN: 93491316012590

End of Year - Fair

992



| efile GRAPHIC print - DO NOT PROCESS      | As Filed Data -                  |            | DLN: 93491316012590 |  |  |  |  |
|---|----------------------------------|------------|---------------------|--|--|--|--|
| TY 2019 Other Decreases Scho              | TY 2019 Other Decreases Schedule |            |                     |  |  |  |  |
|   |                                  |            |                     |  |  |  |  |
| Name:                                     | THE FAT TIRE                     | FOUNDATION |                     |  |  |  |  |
| EIN:                                      | 20-8066058                       |            |                     |  |  |  |  |
| De  | escription                       |            | Amount              |  |  |  |  |
| BOOK/GAAP DIFFERENCE: PUBLICLY TRA        | ADED SECURITIES                  | S          | 921,629             |  |  |  |  |
| BOOK/GAAP DIFFERENCE: DIVIDEND & INTEREST |                                  | 18,428     |                     |  |  |  |  |
| BOOK/GAAP DIFFERENCE: OTHER INCOM         | 4E                               |            | 32                  |  |  |  |  |
| BOOK/GAAP DIFFERENCE: GRANTS              |                                  |            | 191,770             |  |  |  |  |
| BOOK/GAAP DIFFERENCE: PROFESSION          | AL SERVICES                      |            | 10,568              |  |  |  |  |
| BOOK/GAAP DIFFERENCE: FEDERAL EXC         | ISE TAXES                        |            | 55,398              |  |  |  |  |
| BOOK/GAAP DIFFERENCE: BEGINNING N         | IET ASSETS                       |            | 730,300             |  |  |  |  |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data -                      |                          | DLN:                   | 93491316012590                              |  |  |
|--------------------------------------|--------------------------------------|--------------------------|------------------------|---|--|--|
| TY 2019 Other Expenses Schedule      |                                      |                          |                        |   |  |  |
|                                      |                                      |                          |                        |   |  |  |
| Name                                 | : THE FAT TIRE F                     | FOUNDATION               |                        |   |  |  |
| EIN                                  | N: 20-8066058                        |                          |                        |   |  |  |
| Other Expenses Schedule              |                                      |                          |                        |   |  |  |
| Description                          | Revenue and<br>Expenses per<br>Books | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for<br>Charitable<br>Purposes |  |  |
| STATEMENT OF INFORMATION FEES        | 20                                   | 0                        | 0                      | 0   |  |  |

10,900

317

GW WADE INVESTMENT MANAGEMENT FEES

JPM INVESTMENT MANAGEMENT FEES

10,900

317

efile GRAPHIC print - DO NOT PROCESS

Name: THE FAT TIRE FOUNDATION

As Filed Data -

Other Income Schedule

**EIN:** 20-8066058

32

Net Investment

Income

DLN: 93491316012590

Description

OTHER INCOME

Revenue And **Expenses Per Books** 

Adjusted Net Income

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data -         | DLN: 93491316012590 |  |  |  |
|--------------------------------------|-------------------------|---------------------|--|--|--|
| TY 2019 Other Increases Schedule     |                         |                     |  |  |  |
|                                      |                         |                     |  |  |  |
| Name:                                | THE FAT TIRE FOUNDATION |                     |  |  |  |
| EIN:                                 | 20-8066058              |                     |  |  |  |
|                                      |                         |                     |  |  |  |
| De                                   | escription              | Amount              |  |  |  |
| BOOK/GAAP DIFFERENCE: CONTRIBUTION   | •                       | Amount 310          |  |  |  |
|                                      | ON INCOME               |                     |  |  |  |
| BOOK/GAAP DIFFERENCE: CONTRIBUTION   | ON INCOME<br>EXPENSES   | 310                 |  |  |  |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - |         | D                 | LN: 93491316012590 |
|--------------------------------------|-----------------|---------|-------------------|--------------------|
| TY 2019 Other Liabilities Schedule   |                 |         |                   |                    |
|                                      |                 |         |                   |                    |
| Name:                                | THE FAT TIRE FO | UNDATIO | N                 |                    |
| FTN.                                 | 20-8066058      |         |                   |                    |
|                                      | EIN: 20-6000036 |         |                   |                    |
| Description                          | n               |         | Beginning of Year | End of Year -      |
|                                      |                 |         | - Book Value      | Book Value         |
| PLEDGES PAYABLE                      |                 |         | - Book Value      | 2,047,246          |
| PLEDGES PAYABLE  EXCISE TAX PAYABLE  |                 |         |                   |                    |

| efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 934913160125 |                      |                          |                        |   |  |
|--|----------------------|--------------------------|------------------------|---|--|
| TY 2019 Taxes Schedule   |                      |                          |                        |   |  |
|  |                      |                          |                        |   |  |
| Nam  | e: THE FAT TIR       | RE FOUNDATION            |                        |   |  |
| EI   | <b>N:</b> 20-8066058 | ;                        |                        |   |  |
| Category   | Amount               | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements<br>for Charitable<br>Purposes |  |
| FEDERAL TAXES  | 14,183               | 0                        | 0                      | 0   |  |
| STATE TAXES  | 10                   | 0                        | 0                      | 0   |  |
| STATE FILING FEES  | 150                  | 0                        | 0                      | 0   |  |
| FOREIGN TAX PAID - GWW #0374   | 444                  | 444                      | 0                      | 0   |  |
| FOREIGN TAX PAID - JPM #3005   | 2,773                | 2,773                    | 0                      | 0   |  |
| FOREIGN TAX PAID - JPM #7004   | 1,163                | 1,163                    | 0                      | 0   |  |
| FOREIGN TAX PAID - GWW #8510   | 2,627                | 2,627                    | 0                      | 0   |  |

| efile GRAPHIC print - DC   | NOT PROCESS As Filed Data   | -  |   | DLN: 93491316012590   |  |  |
|--|---|--|---|---|--|--|
| Schedule B   | Schee   | dule of Contributors   |   | OMB No. 1545-0047   |  |  |
| (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service  |   | to Form 990, 990-EZ, or 990-PF.<br>.gov/Form990 for the latest infor                             | mation.   | 2019  |  |  |
| Name of the organization THE FAT TIRE FOUNDATION   | V   |  | Employer i  | dentification number  |  |  |
| Organization type (chec  |   |  | 20-8066058  | 3   |  |  |
| Organization type (chec  | K Offe).  |  |   |   |  |  |
| Filers of:   | Section:  |  |   |   |  |  |
| Form 990 or 990-EZ   | 501(c)( ) (enter number   | ) organization   |   |   |  |  |
|  | ☐ 4947(a)(1) nonexempt ch   | 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation                 |   |   |  |  |
|  | ☐ 527 political organization  | 527 political organization   |   |   |  |  |
| Form 990-PF  | <b>☑</b> 501(c)(3) exempt private   | foundation   |   |   |  |  |
|  | 4947(a)(1) nonexempt ch   | 4947(a)(1) nonexempt charitable trust treated as a private foundation                            |   |   |  |  |
|  | 501(c)(3) taxable private foundation  |  |   |   |  |  |
|  | ion filing Form 990, 990-EZ, or 990<br>property) from any one contributor.  |  |   |   |  |  |
| Special Rules  |   |  |   |   |  |  |
| under sections 50 received from any  | on described in section 501(c)(3) fil<br>9(a)(1) and 170(b)(1)(A)(vi), that c<br>one contributor, during the year, t<br>1h, or (ii) Form 990-EZ, line 1. Co                                   | hecked Schedule A (Form 990 otal contributions of the greater                                    | or 990-EZ), Part II, line 13  | , 16a, or 16b, and that   |  |  |
| during the year, to  | on described in section 501(c)(7), (<br>tal contributions of more than \$1,0<br>ne prevention of cruelty to children  | 000 <i>exclusively</i> for religious, ch   | aritable, scientific, literary,   |   |  |  |
| during the year, could be during the year. | on described in section 501(c)(7), (contributions exclusively for religious ked, enter here the total contribution mplete any of the parts unless the le, etc., contributions totaling \$5,00 | s, charitable, etc., purposes, buns that were received during the General Rule applies to this o | ut no such contributions tot<br>ne year for an e <i>xclusively</i> r<br>rganization because it rece | aled more than \$1,000. eligious, charitable, etc., eived <i>nonexclusively</i> |  |  |
| 990-EZ, or 990-PF), but it   | that isn't covered by the General I<br>must answer "No" on Part IV, line<br>rt I, line 2, to certify that it doesn't r  | e 2, of its Form 990; or check th  | ie box on line H of its Form  | •   |  |  |
| For Paperwork Reduction Ac   | t Notice, see the Instructions  | Cat. No. 30613X  | Schedule B (Form 99   | 0, 990-EZ, or 990-PF) (2019)  |  |  |

for Form 990, 990-EZ, or 990-PF.

Employer identification number 20-8066058

| HE FAT TIRE FOU        | NDATION  | 20-8066058                 |  |
|------------------------|--|----------------------------|--|
| Part I<br>Contributors | Contributors (see instructions). Use duplicate copies of Part I if add | litional space is needed.  |  |
| (a)<br>No.             | (b)<br>Name, address, and ZIP + 4                                      | (c)<br>Total contributions | (d)<br>Type of contribution  |
| 1                      | JEFFREY AND KAREN JORDAN PO BOX 1707  LOS ALTOS, CA 94023              | \$ 2,439,230               | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a)<br>No.             | (b)<br>Name, address, and ZIP + 4                                      | (c)<br>Total contributions | (d)<br>Type of contribution  |
|                        |  | \$                         | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a)<br>No.             | (b)<br>Name, address, and ZIP + 4                                      | (c)<br>Total contributions | (d)<br>Type of contribution  |
|                        |  | \$                         | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a)<br>No.             | (b)<br>Name, address, and ZIP + 4                                      | (c)<br>Total contributions | (d)<br>Type of contribution  |
|                        |  | \$                         | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a)<br>No.             | (b)<br>Name, address, and ZIP + 4                                      | (c)<br>Total contributions | (d)<br>Type of contribution  |
|                        |  | \$                         | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a)<br>No.             | (b)<br>Name, address, and ZIP + 4                                      | (c) Total contributions    | (d)<br>Type of contribution  |
|                        |  | \$                         | Person Payroll Noncash (Complete Part II for noncash contributions.) |

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

| Schedule                  | B (Form 990, 990-EZ, or 990-PF) (2019)                                |   | Page  |
|---------------------------|---|---|---|
|                           | rganization<br>IRE FOUNDATION   |   | Employer identification number 20-8066058   |
| Part III                  | than \$1,000 for the year from any one contribute                     | or. Complete columns (a<br>of exclusively religious<br>uctions.) ► \$ | escribed in section 501(c)(7), (8), or (10) that total more (a) through (e) and the following line entry. For s, charitable, etc., contributions of \$1,000 or less for |
| (a)<br>No. from<br>Part I | (b) Purpose of gift   | (c) Use of gift   | (d) Description of how gift is held   |
|                           | (e) Transfer of gift Transferee's name, address, and ZIP 4 Relationsh |   | gift Relationship of transferor to transferee   |
| (2)                       |   |   |   |
| (a)<br>No. from<br>Part I | (b) Purpose of gift   | (c) Use of gift   | t (d) Description of how gift is held   |
|                           | Transferee's name, address, and ZIP 4                                 | (e) Transfer of gi  | gift Relationship of transferor to transferee   |
| (a)<br>No. from<br>Part I | (b) Purpose of gift   | c) Use of gift  | t (d) Description of how gift is held   |
|                           |   | gift  |   |
|                           | Transferee's name, address, and ZIP 4                                 |   | Relationship of transferor to transferee  |
| (a)<br>No. from<br>Part I | (b) Purpose of gift   | c) Use of gift  | (d) Description of how gift is held   |
|                           | Transferee's name, address, and ZIP 4                                 | (e) Transfer of gi  | gift Relationship of transferor to transferee   |
|                           |   |   | Schedule B (Form 990, 990-EZ, or 990-PF) (2019  |