Form 990-PF / Department of the Treasury Internal Revenue Service

EXTENDED TO NOVEMBER 16, 2020

Return of Private Foundation

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

➤ Do not enter social security numbers on this form as it may be made public.

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

OMB No 1545-0047

For calendar year 2019 or tax year beginning		, and ending		
Name of foundation			A Employer identification	number
TARA HEALTH FOUNDATION			46-5645300	1
Number and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
47 KEARNY STREET		600		9025
City or town, state or province, country, and ZIP or foreign p SAN FRANCISCO, CA 94108	ostal code		C If exemption application is p	ending, check here
G Check all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	chack hara
Final return	Amended return	Trilei public charity	1. For eight organizations	s, check here
Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test,
1 Check type of organization: X Section 501(c)(3) ex		011	E If private foundation sta	·
Section 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ation 04	under section 507(b)(1)	
Fair market value of all assets at end of year J Account	ing method: Cash	X Accrual	F If the foundation is in a	60-month termination
	ther (specify)		under section 507(b)(1)	(B), check here
\$ 75,960,584. (Part I, column	nn (d), must be on cash basi	IS.)		1 (4)
Part: Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(0) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received			N/A	
2 Check X if the foundation is not required to attach Sch. B				data (commente de la commenta del commenta del commenta de la commenta del commenta del commenta de la commenta del commenta de la commenta del commenta de
3 Interest on savings and temporary cash investments	120 000	2 120 026		ama menunanan d
4 Dividends and interest from securities	2,138,826.	2,138,826.	····	STATEMENT 1
5a Gross rents b Net rental income or (loss)	-0.000 CONTROL OF THE	KOVESON ODBIK. TOPOGRACIE		
6a Net gain or (loss) from sale of assets not on line 10	319,094.	The state of the s		
	325,0525			
b Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2)		319,094.	RECEIV	5 0
8 Net short-term capital gain				
9 Income modifications			5 NOV ATA 2	กวก
Gross sales less returns and allowances				(2) (2) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
b Less Cost of goods sold			St. See Transfer of Ass.	
c Gross profit or (loss)			L OGDEN,	
11 Other income	2,457,920.	2,457,920.		
12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc	70,000.	0.		70,000
14 Other employee salaries and wages	479,902.	0.		442,403
15 Pension plans, employee benefits	,			,
16a Legal fees STMT 2	18,000.	0.	`	634
16a Legal fees STMT 2 b Accounting fees . STMT 3	19,375.	0.		589
c Other professional fees STMT 4	782,869.	0.		508,866
17 Interest 18 Taxes STMT 5 19 Depreciation and depletion	126 050			
18 Taxes STMT 5	136,058.	0.	-	0
Depreciation and depletion Cocupancy	72,631.	0.		65,573
₹ 21 Travel, conferences, and meetings	148,104.	0.		148,104
22 Printing and publications	210/1013			210,102
	483,675.	404,952.	`	67,171
23 Other expenses STMT 6 24 Total operating and administrative expenses. Add lines 13 through 23				
expenses. Add lines 13 through 23	2,210,614.	404,952.		1,303,340
25 Contributions, girts, grants paid	6,051,993.			7,533,046
26 Total expenses and disbursements.	0 000 00	404 050		0 005 005
Add lines 24 and 25	8,262,607.	404,952.	SOURCE DESCRIPTION OF A PROPERTY OF A PROPER	8,836,386
27 Subtract line 26 from line 12:	-E 904 607			
Excess of revenue over expenses and dishursements Net investment income (dispersive sets)	<5,804,687.	2,052,968.		
b Net investment income (if negative, enter -0) C Adjusted net income (if negative, enter -0-)		2,032,300.	N/A	
a rajusted net income (ir negative, enter -o-)	[100191992] \$1,70097365F70SH7 F05773H659886F0*X [1	200000059000000000000000000000000000000	14 / AZ	503586 8678788278 387878783878887888

923501 12-17-19 LHA For Paperwork Reduction Act Notice, see instructions.

Partill Balance Sheets Attached schedules and amounts in to	he description	Beginning of year	End :	of year
column should be for end-of-year am	ounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing		***		
2 Savings and temporary cash investments		1,040,416.	15,034.	15,034.
	100,461.			
Less: allowance for doubtful accounts		183,826.	100,461.	100,461.
4 Pledges receivable		200,0200	2007101	2007101
Less; allowance for doubtful accounts	····			•
5 Grants receivable		'		
6 Receivables due from officers, directors, trustèes, and	other			
disqualified persons	oute.			
	505,853.			
Less: allowance for doubtful accounts	0.	2,805,358.	3,505,853.	3,505,853.
		2,003,3301	3,303,033.	3,303,033.
9 Prepaid expenses and deferred charges		69,681.	9,955.	9,955.
10a Investments - U.S. and state government obligations		00,0020	3,7333.	3,7331
b Investments - corporate stock			, , , , , , , , , , , , , , , , , , ,	
c Investments - corporate bonds			- "	
- 11 Investments - land, buildings, and equipment basis				
Less accumulated depreciation				
12 Investments - mortgage loans				
1	STMT 8	67,240,052.	72,148,841.	72,148,841.
14 Land, buildings, and equipment basis	11,272.			
Less accumulated depreciation		Ö.	11,272.	. 11,272.
	MENT 9)	150,899.	169,168.	169,168.
16 Total assets (to be completed by all filers - see the	,	230,033.	103,100.	103,100.
instructions. Also, see page 1, item I)		71,490,232.	75,960,584.	75,960,584.
17 Accounts payable and accrued expenses		34,326.	73,109.	,3,7500,3010
18 Grants payable		6,096,901.	4,615,848.	
40.04		0,030,3010	2,023,0100	
20 Loans from officers, directors, trustees, and other disqualified per 21 Mortgages and other notes payable	cone			
21 Mortgages and other notes payable	30113	J		
22 Other liabilities (describe STATE)	MENT 10)	0:	115,677.	
	, <u> </u>			
23 Total liabilities (add lines 17 through 22)	~	6,131,227.	4,804,634.	
Foundations that follow FASB ASC 958, check here	. •			
	,			
and complete lines 24, 25, 29, and 30. 24 Net assets without donor restrictions 25 Net assets with donor restrictions	•			
25 Net assets with donor restrictions		H1		
Foundations that do not follow FASB ASC 958, check and complete lines 26 through 30.	here 🕨 🗶			
and complete lines 26 through 30.				
b 26 Capital stock, trust principal, or current funds		0.	0.	
$\frac{9}{9}$ 27 Paid-in or capital surplus, or land, bldg., and equipment	fund	0.	0.	
27 Paid-in or capital surplus, or land, bldg., and equipment 28 Retained earnings, accumulated income, endowment, or	r other funds	65,359,005.	71,155,950.	
29 Total net assets or fund balances		65,359,005.	71,155,950.	
Ž		-		
30 Total liabilities and net assets/fund balances		71,490,232.	75,960,584.	
Partilli Analysis of Changes in Net Asset	s or Fund B	alances		
		· · · · · · · · · · · · · · · · · · ·		
1 Total net assets or fund balances at beginning of year - Part I	l, column (a), line	29	' .	
(must agree with end-of-year figure reported on prior year's r	eturn)		1	65,359,005.
2 Enter amount from Part I, line 27a	•		·2	<5,804,687.>
3 Other increases not included in line 2 (itemize)		SEE ST.	ATEMENT 7 3	11,616,888.
4 Add lines 1, 2, and 3			4	71,171,206.
5 Decreases not included in line 2 (itemize) ► BOOK/T			5	15,256.
6 Total net assets or fund balances at end of year (line 4 minus	line 5) - Part II, co	olumn (b), line 29	6	71,155,950.

923511 12-17-19

Part IV Capital Gains an	d Losses for Tax on Ir	nvestmen	t Income		,			
	kind(s) of property sold (for exa louse; or common stock, 200 sh		ate,	(b) How a P - Pur D - Dor	cquired chase nation		acquired lay, yr.)	(d) Date sold (mo., day, yr.)
1a								
b SEE ATTACHED S	STATEMENT							
С								
d								
е	 			L				L
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				iain or (loss) s (f) minus (
<u>a</u> b			-	-		.		
C								
d								
e 15,114,371.		• 1	4,795,27	7.				319,094.
Complete only for assets showing of	jain in column (h) and owned by	the foundation	n on 12/31/69.		(1) Gains (C	Col. (h) gain	minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ֈ), ıf any		col		not less that (from col. (
a								
b								
С								
d								
e							· · · · · · · · · · · · · · · · · · ·	319,094.
2 Capital gain net income or (net capital	al loss) { If gain, also enter of the loss	r in Part I, line - in Part I, line	7 : 7	} 2				319,094.
3 Net short-term capital gain or (loss)	•							
If gain, also enter in Part I, line 8, col		(.).		J				
If (loss), enter -0- in Part I, line 8	ler Section 4940(e) for] 3	<u> </u>		N/A	
If section 4940(d)(2) applies, leave this Was the foundation liable for the section	4942 tax on the distributable am		•	ıod?				Yes X No
If "Yes," the foundation doesn't qualify u 1 Enter the appropriate amount in eac				ntries.				
(a) Base period years	(b)			(c)			Distrib	(d) oution ratio
Calendar year (or tax year beginning			Net value of nor			1	(col. (b) dıv	rided by col. (c))
2018		8,522. 6,958.			21,134			.100867
2017		9,857.			36,905 7 4 ,782			.071304
2016 2015		$\frac{3,837}{5,215}$			$\frac{4}{23}, \frac{782}{234}$.148513
2013	•	5,000.			$\frac{13,234}{27,026}$		1	.025449
2014		3,000.	l,	7,02	17,020			.025447
2 Total of line 1, column (d)						2		.452068
3 Average distribution ratio for the 5-ye the foundation has been in existence		on line 2 by 5.	0, or by the numbe	er of years		3		.090414
4 Enter the net value of noncharitable-	use assets for 2019 from Part X,	line 5				4	7	1,501,296.
5 Multiply line 4 by line 3						5		6,464,718.
6 Enter 1% of net investment income (1% of Part I, line 27b)					6_	-	20,530.
7 Add lines 5 and 6						7		6,485,248.
8 Enter qualifying distributions from Pa						8		8,836,386.
If line 8 is equal to or greater than lin See the Part VI instructions.	e 7, check the box in Part VI, line	1b, and comp	olete that part using	ga 1% tax	rate.			000 DE (0040

RamilVI Capital Gains and Lo	osses for Tax on Investment Income			
	d describe the kind(s) of property sol prick warehouse; or common stock, 2		(b) How acquired P - Purchase D - Donation	(c) Date acquired (d) Date sold (mo., day, yr.)
1a ML #02041 - SE			P	06/04/1805/10/19
b ML #02041 - SE			P	09/15/16/10/15/19
c ML #02214 - SE		CHED	P	05/31/1906/25/19
d ML #02214 - SE		CHED	P	09/07/1606/25/19
e ML #02256 - SE			P	09/07/1807/25/19
f ML #02256 - SE			P	07/27/1607/25/19
g ML #02214 - SE	EE STATEMENT ATTA	CHED	P	03/05/1903/29/19
h				
	 			
<u></u>				
<u>k</u>				
m				
n	.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
0				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale) Gain or (loss) clus (f) minus (g)
a 287,524.	1 '	284,722.	(4) p	2,802.
b 1,926,202.		1,924,236.		1,966.
c 672,014.		677,836.		<5,822.>
d 10,004,822.	1	9,937,461.		67,361.
e 283,873.		302,232.		<18,359.>
1,939,159.		1,668,790.		270,369.
g 777.				777.
h				
1				
1				
<u>k</u>				
1				
<u>m</u>				
0				
	ng gain in column (h) and owned by	the foundation on 12/31/69	(1)1 os	ses (from col. (h))
	(j) Adjusted basis	(k) Excess of col. (i)	Gains (excess o	of col. (h) gain over col. (k),
(i) F.M.V. as of 12/31/69	as of 12/31/69	over col. (j), if any	but n	ot less than "-0-")
a				2,802.
b			T-1	1,966.
С				<5,822.>
d				67,361.
<u>e</u>				<18,359.>
<u>f</u>				270,369.
9				777.
h		•		
1				
<u>l</u>				
<u>K</u>				
m	<u> </u>			
n				
0				
	. If one also enter	un Part I line 7		1
2 Capital gain net income or (net ca		_	2	319,094.
3 Net short-term capital gain or (los) If gain, also enter in Part I, line 8, If (loss), enter "-0-" in Part I, line		d (6):		N/A
1000), 01101 0 1111 4111, 11116	<u> </u>		3	11/12

Design Total Transport of the Annual Continue And Annual Continue Annu	1040/h) 4040/h) 4	040 504	3300 rage	<u>-</u>
Part VI Excise Tax Based on Investment Income (Section 4940(a		948 - see	instructions)	
1a Exempt operating foundations described in section 4940(d)(2), check here and enter				**
Date of ruling or determination letter: (attach copy of letter if necess:				\$
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	X and enter 1%	1	20,530	•
of Part I, line 27b				
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others	, enter -0-)	2	0	<u>:</u>
3 Add lines 1 and 2		3	20,530	•
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others	s, enter -0-)	4	0	<u>-</u>
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	20,530	•
6 Credits/Payments:				
a 2019 estimated tax payments and 2018 overpayment credited to 2019	sa 26,181.			
b Exempt foreign organizations - tax withheld at source	6b 0.			
c Tax paid with application for extension of time to file (Form 8868)	ic 20,000.			*
· · · · · · · · · · · · · · · · · · ·	6d , O.			3 (
7 Total credits and payments. Add lines 6a through 6d		7	46,181	•
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	1	8	0	-
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	· •	9		_
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	10	25,651	- •
11 Enter the amount of line 10 to be; Credited to 2020 estimated tax	25,651. Refunded	11	0	<u>-</u>
Part VII A Statements Regarding Activities	· · ·	<u> </u>	, , ,	-
1a During the tax year, did the foundation attempt to influence any national, state, or local legislatio	n or did it participate or intervene	ın	Yes No	_
any political campaign?		•	1a X	-
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes?	See the instructions for the defini	tion	1b X	_
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of an				<u></u>
distributed by the foundation in connection with the activities.	,			
c Did the foundation file Form 1120-POL for this year?			1c X	22
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	r ,'			8
(1) On the foundation. ► \$ 0 • (2) On foundation managers. ►				
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure				3 1
managers. > \$ 0.	an imposed on realisation			3
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?			2 X	24
If "Yes," attach a detailed description of the activities.			3700 3000 000	<u>~</u>
3 Has the foundation made any changes, not previously reported to the iRS, in its governing instru	iment articles of incorporation of	r		8
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	omong artifactor or moorporation, o		3 X	33 1
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			. 4a X	-
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	1 4b 22	- .
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	•,	-17.22	5 X	-
If "Yes," attach the statement required by General Instruction T		•		<u>.</u>
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				8
By language in the governing instrument, or	•			3
By state legislation that effectively amends the governing instrument so that no mandatory directions are supported by the state of the state o	actions that conflict with the state	law		8
remain in the governing instrument?	ections that conflict with the state	IAVV	6 X	▩.
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete	Part II and (a) and Part VV		7 X	- ,
7 Did the foundation have at least \$0,000 in assets at any time during the year? If Tes, Complete	rait ii, coi. (c), aliu rait XV		/ A	-
On Enter the states to which the foundation reports or with which it is required. Can instruction	_	•		3
8a Enter the states to which the foundation reports or with which it is registered. See instructions. CA, DE				ä
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorn	any Canaral (or designate)			×
	iey deligial (or designate)		8b X	2
of each state as required by General Instruction G? If "No," attach explanation	ADAD(A)(2) or ADAD(A)(5) for (-)	adar '	8b X	= ~
9 Is the foundation claiming status as a private operating foundation within the meaning of section		iudi	9 X	
year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete	•	,	 	_
10 Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule list	ting their names and addresses		orm 990-PF (2019	<u>-</u>
		-	VIIII 330-FF (2015	")

orm	990-PF (2019) TARA HEALTH FOUNDATION	46-5645	300		Page 5
Pa	rt:VII-A Statements Regarding Activities (continued)				
				Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				
	section 512(b)(13)? If "Yes," attach schedule. See instructions		11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advise	ory privileges?			
	If "Yes," attach statement. See instructions		12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X	
	Website address ► HTTP://WWW.TARAHEALTHFOUNDATION.ORG/	•			
14	The books are in care of FAMILY PHILANTHROPY ADVISORS Telephone	no. ▶ (612)3	77-	840	0
	Located at ▶ 1818 OLIVER AVENUE SOUTH, MINNEAPOLIS, MN	ZIP+4 ▶55			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			<u> </u>	
	and enter the amount of tax-exempt interest received or accrued during the year	▶ 15	N	/A	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,	<u> </u>		Yes	No
	securities, or other financial account in a foreign country?		16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			****	****
	foreign country >	•			
Pâ	irt VII B Statements Regarding Activities for Which Form 4720 May Be Required				1
-cusca.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		*****	Yes	No
1a	During the year, did the foundation (either directly or indirectly):		8333		****
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
	a disqualified person?	Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?				
	(4) Fay compensation to, or pay of reimborse the expenses of, a disqualified person (or make any of either available	, 163 [100			
	,	Yes X No			
	for the benefit or use of a disqualified person)?	1 162 [XX] 140			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"				
	If the foundation agreed to make a grant to or to employ the official for a period after	Yes X No			
	termination of government service, if terminating within 90 days.)	Yes LA NO			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			2222	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	. —	1b	A04030543	X
	Organizations relying on a current notice regarding disaster assistance, check here	▶∟			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	•		XX	
	before the first day of the tax year beginning in 2019?	•	1c	an restaurance of	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating founda-	tion			
	defined in section 4942(j)(3) or 4942(j)(5)):				
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines				
	6d and 6e) for tax year(s) beginning before 2019?	Yes X No			
	If "Yes," list the years - ,,,,				
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to income	rrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and a				
	statement - see instructions.)	$\mathbf{N}/\mathbf{A}^{\prime}$	2b		
c	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
)				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
	during the year?	Yes X No			
h	of "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified person				
_	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7))				
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 47)				
	Schedule C, to determine if the foundation had excess business holdings in 2019.)	N/A	3b	22000	220038863
A-	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	2.,	4a	\vdash	x
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable pui	nose that	>	23888	******
Ų	, Die me reangation make any investment in a prior year (out after becomber on, 1909) that could joepardize its charitable put	poso mar	138882338	<i>33.</i>	1.63836638635

had not been removed from jeopardy before the first day of the tax year beginning in 2019?

, , , , , , , , , , , , , , , , , , ,			<i>AC ECAE</i> 2	00 0
Form 990-PF (2019) TARA HEALTH FOUNDATION Part VII B Statements Regarding Activities for Which I	Form 4720 May Be F		46-56453	00 Page 6
5a During the year, did the foundation pay or incur any amount to:	or in 4720 may be i	icqui ca (contin	Jeco)	Yes No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	□ Y (es X No 🖁	
(2) Influence the outcome of any specific public election (see section 4955); of				
any voter registration drive?			es 🗶 No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?		es 🗶 No	
(4) Provide a grant to an organization other than a charitable, etc., organizatio				
4945(d)(4)(A)? See instructions		X Y	es 🔲 No 🐰	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or		
the prevention of cruelty to children or animals?		Ye	es 🗶 No 📗	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit	der the exceptions described i	n Regulations		
section 53.4945 or in a current notice regarding disaster assistance? See instr	uctions			5b X
Organizations relying on a current notice regarding disaster assistance, check l	here	•		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for	rom the tax because it maintai			
expenditure responsibility for the grant?	E STATEMENT 1	1 X Y	es ∐ No 🎇	
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			li i	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		Ye	es 🛣 No 🙎	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870.		┌	· '.	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es 🗶 No 🎉	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	51,000,000 in remuneration or		્રાસ્ટા 🖁	
excess parachute payment(s) during the year?	ann Foundation Ma		es 🗶 No 🦓	
Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, rugniy	,	
1 List all officers, directors, trustees, and foundation managers and t	heir compensation.		•	
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
RUTH SHABER	PRESIDENT			
C/O 1818 OLIVER AVENUE SOUTH				`
MINNEAPOLIS, MN 55405	40.00	34,599.	0.	2,609.
RIVKA GORDON	SECRETARY			
C/O 1818 OLIVER AVENUE SOUTH				
MINNEAPOLIS, MN 55405	4.00	35,000.	0.	6,017.
	TREASURER			
C/O 1818 OLIVER AVENUE SOUTH		,		
MINNEAPOLIS, MN 55405	4.00	35,000.	0.	228.
	,			
2 Compensation of five highest-paid employees (other than those inc	luded on line 4\ If none	anton UNONE II		
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter NONE.	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans	account, other
ELISE K BELUSA - 47 KERNEY STREET	devoted to position STRATEGY OFFI	CED	compensation	allowances
#600, SAN FRANCISCO, CA 94108	40.00	167,925.	0.	0.
	EMPLOYEE	107,923.	0.	
#600, SAN FRANCISCO, CA 94108	40.00	88,269.	0.	0.
		FICER		
#600, SAN FRANCISCO, CA 94108	40.00	51,194.	0.	0.
	EMPLOYEE	,	`	
#600, SAN FRANCISCO, CA 94108	40.00	36,667.	0.	0.
LISA B HAMMANN - 47 KERNEY STREET	CHIEF OPERATI		R	
#600, SAN FRANCISCO, CA 94108	10.00	24,375.	· ~ 0.	0.
Total number of other employees paid over \$50,000			▶	3
			Form	990-PF (2019)

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations mi	ust complete the	s part Foreign fou	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable	, etc., purposes:		2 16 A	
а	Average monthly fair market value of securities			1a	71,771,198.
b	Average of monthly cash balances			1b	818,950.
	Fair market value of all other assets			1c	
d	Total (add lines 1a, b, and c)			1d	72,590,148.
	Reduction claimed for blockage or other factors reported on lines 1a and			25.1	· · · · · · · · · · · · · · · · · · ·
	1c (attach detailed explanation)	1e	0.		
2	Acquisition indebtedness applicable to line 1 assets	<u> </u>		2	0.
3	Subtract line 2 from line 1d			3	72,590,148.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount,	see instructions)		4	1,088,852.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on			5	71,501,296.
6	Minimum investment return. Enter 5% of line 5	•		6	3,575,065.
P	art XI Distributable Amount (see instructions) (Section 4942(1)(3) and	d (j)(5) private ope	rating foundations ar	id certain	·
	foreign organizations, check here and do not complete this part.)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
1	Minimum investment return from Part X, line 6			1	3,575,065.
2a	Tax on investment income for 2019 from Part VI, line 5	2a	20,530.	÷ 4"	
b	Income tax for 2019. (This does not include the tax from Part VI.)	2b		rom Total	
C	Add lines 2a and 2b	-		2c	20,530.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	3,554,535.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	3,554,535.
6	Deduction from distributable amount (see instructions)			6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part X	(III, line 1		7	3,554,535.
P	art XII Qualifying Distributions (see instructions)			1	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpo	oses:	`.	3.	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		`	1a	8,836,386.
b	Program-related investments - total from Part IX-B			1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable	e, etc., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the:			1 1	
а	Suitability test (prior IRS approval required)			3a	
b	Cash distribution test (attach the required schedule)			3ъ	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and	d Part XIII, line 4		4	8,836,386.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net inves	tment			
	income. Enter 1% of Part I, line 27b			5	20,530.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	8,815,856.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years whe 4940(e) reduction of tax in those years.	en calculating whe	ther the foundation o	qualifies for	
_		*			

Part XIII Undistributed Income (see instructions)

LAS. LIVANNING NO. P. SERVINGO.		· · · · · · · · · · · · · · · · · · ·			
	,	(a) Corpus	(b) Years prior to 2018	(c) 2018	. (d) 2019
1 Distributable amount fo	or 2019 from Part XI,		·		
line 7					3,554,535.
2 Undistributed income, if an	y, as of the end of 2019			_	
a Enter amount for 2018	only			, O.	
b Total for prior years:					
3 Excess distributions ca	, to 2010:		0.		
· ·	229,053.				
a From 2014 b From 2015	897,463.				
c From 2016	4,198,128.				
d From 2017	1,759,582.				
e From 2018	3,973,047.				
f Total of lines 3a throug		11,057,273.			
4 Qualifying distributions					
	8,836,386.			`	
a Applied to 2018, but no	ot more than line 2a			. 0.	
b Applied to undistribute					
years (Election required	d - see instructions)		0.		
c Treated as distributions	out of corpus				
(Election required - see	instructions)	0.			
d Applied to 2019 distribi					3,554,535.
e Remaining amount dist	ributed out of corpus	5,281,851.			
5 Excess distributions carryo (If an amount appears in column (in the shown in column (in the shown in column (in the shown in the s	lumn (d), the same amount	0.			0.
6 Enter the net total of e indicated below:	ach column as				
, a Corpus Add lines 3f, 4c, ar	nd 4e Subtract line 5	16,339,124.			
b Prior years' undistribut	ed income. Subtract				
line 4b _, from line 2b			0.		
c Enter the amount of pri			,		
undistributed income for deficiency has been iss					
the section 4942(a) tax			0.		
assessed	. Ch. Tauabla		0.		
d Subtract line 6c from lii			0.		
amount - see instructio			0.		
e Undistributed income for 4a from line 2a. Taxable				n.	
f Undistributed income for			79-79-70-79-70-79-70-79-70-79-70-79-70-79-70-79-70-79-70-79-70-79-70-79-70-70-70-70-70-70-70-70-70-70-70-70-70-	· ·	
lines 4d and 5 from line					
be distributed in 2020					0.
7 Amounts treated as dis	tributions out of	***************************************			
corpus to satisfy requir	ements imposed by				
section 170(b)(1)(F) or		<u>'</u>			
may be required - see i		0.			
8 Excess distributions ca	rryover from 2014				
not applied on line 5 or		229,053.			
9 Excess distributions ca		4.5.44.5.55			
Subtract lines 7 and 8 f	rom line 6a	16,110,071.	00000000000000000000000000000000000000	700 TO THE TOTAL PROPERTY OF THE TOTAL PROPE	The second secon
10 Analysis of line 9:	007 460				
a Excess from 2015	897,463.				
b Excess from 2016	4,198,128.				
c Excess from 2017	1,759,582.		1885 CONTROL OF TRANSPORTED TO THE PARTY OF		
d Excess from 2018 e Excess from 2019	3,973,047. 5,281,851.				
923581 12-17-19	3,201,031.	In-recess consequences	/ 	\$50.000 \$50.000 \$50.000 \$4.000 \$50.000 \$50.000 \$50.000 \$50.000 \$50.000 \$50.000 \$50.000 \$50.000 \$50.000 \$50.000	Form 990-PF (2019)

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation status of Purpose of grant or show any relationship to Amount contribution any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year 501(c)(3) ABORTION CARE NETWORK (ACN) NONE EXPANSION OF STRATEGIC P.O. BOX 16323 AND ORGANIZATIONAL MINNEAPOLIS, MN 55416 CAPACITY 100,000. ALL-OPTIONS NONE 501(C)(3) GENERAL OPERATING PO BOX 28284 OAKLAND , CA 94604 30,000. AMERICAN CIVIL LIBERTIES UNION NONE 501(C)(3) REPRODUCTIVE FREEDOM 125 BROAD STREET, 18TH FLOOR PROJECT NEW YORK, NY 10004 150,000. AMERICAN CIVIL LIBERTIES UNION NONE 501(C)(3) CORPORATE ENGAGEMENT 125 BROAD STREET, 18TH FLOOR RECOGNITION NEW YORK, NY 10004 25,000. AS YOU SOW NONE 501(C)(3) GENDER EQUALITY FUND 1611 TELEGRAPH AVE, SUITE 1450 PROJECT OAKLAND, CA 94612 164,000. SEE CONTINUATION SHEET(S) 7,533,046. ▶ 3a **b** Approved for future payment STITCHING EQUILEAP FOUNDATION 501(C)(3) NONE GENERAL OPERATING WEESPERSTRAAT 61, 1018 VN AMSTERDAM, NETHERLANDS 150,000. SOCIETY FOR FAMILY PLANNING NONE 501(C)(3) GENERAL OPERATING 255 S. 17TH STREET, SUITE 2709 PHILADELPHIA, PA 19103 200,000. UCSF FOUNDATION NONE 501(C)(3) GENERAL OPERATING 2200 POST STREET SAN FRANCISCO, CA 94115 301,000. Total SEE CONTINUATION SHEET(S) 1,066,000. Form **990-PF** (2019)

Supplementary Information Grants and Contributions Paid During the Y		<u> </u>		
Recipient Page 1	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
ASIAN AMERICAN JOURNALISTS	NONE	501(C)(3)	GENERAL OPERATING	
ASSOCIATION		561(6)(3)		
THIRD STREET, SUITE 1108			,	
SAN FRANCISCO, CA 94103				275
DEN W. MUDOU HOME C. COUCOT	NONE	501(C)(3)	GENERAL OPERATING	
BEN W. MURCH HOME & SCHOOL ASSOCIATION	HOME	501(0)(3)	GENERAL OPERATING	`
P.O. BOX 6356				
NASHINGTON, DC 20015			,	500
	,			
BUSINESS SOCIAL RESPONSIBILITY (BSR)	NONE	501(C)(3)	BSR CONFERENCE 2019	
220 MONTGOMERY STREET, 17TH FLOOR		,		
SAN FRANCISCO, CA 94104				15,000
CAMBRIDGE REPRODUCTIVE HEALTH	NONE	501(C)(3)	AMERICAN SOCIETY FOR	
CONSULTANTS (CRHC)		101(0)(3)	EMERGENCY	
1770 MASSACHUSETTS AVENUE, SUITE 181			CONTRACEPTION	
CAMBRIDGE, MA 02140				9'0,000
AMBRIDGE REPRODUCTIVE HEALTH	NONE	501(C)(3)	RESEARCH	
CONSULTANTS (CRHC)				
1770 MASSACHUSETTS AVENUE, SUITE 181				
CAMBRIDGE, MA 02140	,			142,000
CARY CHRISTIAN CENTER	NONE	501(C)(3)	GENERAL OPERATING	
154 COTTONWOOD STREET			1	
CARY, MS 39054				20,000
CENTER POR YOUTH WELLNESS	NONE	501(C)(3)	PEARLS DISSEMINATION	
3450 3RD STREET, #201			AND SCIENTIFIC AGENDA	
SAN FRANCISCO, CA 94124			PLANNING	908,000
COMMUNITY CATALYST	NONE	501(C)(3)	ISSUES IN WOMEN'S	
175 RIVERSIDE DRIVE, SUITE 1600	,		HEALTH ACCESS AND	
NEW YORK CITY, NY 10115			QUALITY	75,000
COMMUNITY PARTNERS INTERNATIONAL	NONE	501(C)(3)	IN SUPPORT OF ROHINGYA	
2560 NINTH STREET, SUITE 315 B			REFUGEE CRISIS	
BERKELEY, CA 94710				5,000
EVERYTOWN FOR GUN SAFETY SUPPORT FUND	NONE	501(C)(3)	GENERAL OPERATING	
PO BOX 3886 JEW YORK NY 10163				10 000
YEW YORK, NY 10163 Total from continuation sheets	1	<u> </u>		10,000 7,064,046

Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution show any relationship to Foundation Amount any foundation manager status of Name and address (home or business) recipient or substantial contributor EVERYTOWN FOR GUN SAFETY SUPPORT FUND NONE 501(C)(3) GENERAL OPERATING PO BOX 3886 10,000. NEW YORK, NY 10163 FOUNDATION FOR LOUISIANA NONE 501(C)(3) NATIONAL BIRTH EQUITY 4354 S. SHERWOOD FOREST BLVD. SUITE COLLABORATIVE 5,000. BATON ROUGE, LA 70816 501(C)(3) FRACTURED ATLAS NONE PATIENT FORWARD 248 WEST 35TH STREET INITIATIVE NEW YORK, NY 10001 100,000. 501(C)(3) WOMEN OF THE WORLD GLOBAL DEVELOPMENT INCUBATOR NONE 1401 K STREET NW, SUITE 900 ENDOWMENT WASHINGTON, DC 20005 100,000. GLOBAL DEVELOPMENT INCUBATOR NONE 501(C)(3) WOMEN OF THE WORLD 1401 K STREET NW, SUITE 900 ENDOWMENT WASHINGTON, DC 20005 100,000. GRAB YOUR WALLET NONE 501(C)(3) FORCE THE ISSUE PO BOX 892 CAMPAIGN 75,000. STINSON BEACH, CA 94970 GENERAL OPERATIONS AND 501(C)(3) GROUNDSWELL FUND NONE PO BOX 71642 INTEGRATED VOTER OAKLAND, CA 94612 ENGAGEMENT 60,000. NONE 501(C)(3) TELEABORTION STUDY GYNUITY HEALTH PROJECTS 220 EAST 42ND STREET, #710 NEW YORK, NY 10017 175,000. 501(C)(3) HIGHLANDER RESEARCH AND EDUCATION NONE GENERAL OPERATING CENTER 1959 HIGHLANDER WAY NEW MARKET, TN 37820 5,000. HISPANIC FEDERATION NONE 501(C)(3) GENERAL OPERATING 55 EXCHANGE PLACE, STE 501 5,000. NEW YORK, NY 10005 Total from continuation sheets

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient 501(C)(3) HOPEWELL FUND NONE WOMEN'S FOUNDATION OF CALIFORNIA 1201 CONNECTICUT AVE. NW, SUITE 300 WASHINGTON, DC 20036 50,000. HOPEWELL FUND NONE 501(C)(3) THE EXPAND MEDICATION 1201 CONNECTICUT AVE. NW, SUITE 300 ABORTION ACCESS WASHINGTON, DC 20036 PROJECT (EMAA) 150,000. HOPEWELL FUND NONE 501(C)(3) EQUITY FORWARD 1201 CONNECTICUT AVE. NW, SUITE 300 WASHINGTON, DC 20036 20,000. HUMAN RIGHTS CAMPAIGN FOUNDATION NONE 501(C)(3) GENERAL OPERATING (HRC) 1640 RHODE ISLAND AVENUE NW WASHINGTON, DC 20036 5,000. IBIS REPRODUCTIVE HEALTH NONE 501(C)(3) GENERAL OPERATING 2067 MASSACHUSETTS AVENUE, SUITE 320 CAMBRIDGE, MA 02140 30,000. TIDES FOUNDATION NONE 501(C)(3) IF / WHEN / HOW: 1014 TORNEY AVE, SAN FRANCISCO LAWYERING FOR REPRODUCTIVE JUSTICE SAN FRANCISCO, CA 94219 30,000.) IMPACT ASSETS NONE 501(C)(3) GENDERSMART PLANNING 7315 WISCONSIN AVE. SUITE 1000W GRANT BETHESDA MD 20814 30,000. NARRATIVE NATION 501(C)(3) NONE TRTH TECHNOLOGY 82-155 COUNTRY POINTE CIRCLE QUEENS VILLAGE, NY 11427 200,000. MEN4CHOICE EDUCATION 501(C)(3) NONE GENERAL OPERATING 3420 WHIRLAWAY DR. NORTHRBOOK, IL 60062 30,000. NATIONAL INSTITUTE FOR REPRODUCTIVE NONE 501(C)(3) GENERAL OPERATING HEALTH (NIRH) 14 WALL STREET, SUITE 3B NEW YORK, NY 10005 30,000. Total from continuation sheets

Part XV Supplementary Information				
3 Grants and Contributions Paid During the				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
NATIONAL LATINA INSTITUTE FOR	NONE	501(C)(3)	GENERAL OPERATING	
REPRODUCTIVE HEALTH	,			
50 BROAD STREET, SUITE 1937 NEW YORK, NY 10004				30,000.
1014, 11 1001				30,000.
NATIONAL PARTNERSHIP FOR WOMEN AND	NONE	501(C)(3)	GENERAL OPERATING	
FAMILIES (NPWF)				
1875 CONNECTICUT AVE, NW SUITE 650				
WASHINGTON, DC 20009		ļ		10,000.
NATIONAL PARTNERSHIP FOR WOMEN AND	NONE	501(C)(3)	BUSINESS WORKING GROUP	
PAMILIES (NPWF)		101(0)(0)	FOR GENDER EQUITY	
1875 CONNECTICUT AVE, NW SUITE 650				
WASHINGTON, DC 20009				25,000.
NATIONAL WOMEN'S LAW CENTER	NONE	501(C)(3)	ENGAGING CORPORATIONS	
11 DUPONT CIRCLE, NW	HONE	BUILCY(3)	AROUND GENDER EQUALITY	1
WASHINGTON, DC 20036			•	10,000.
4				
NEW VENTURE FUND	NONE	501(C)(3)	2020 CENSUS PROJECT	
1201 CONNECTICUT AVE. NW, SUITE 300 WASHINGTON, DC 20036				15,000.
	· · · · · · · ·	1		13,000.
,				
PEACE DEVELOPMENT FUND	NONE	501(C)(3)	WOMEN HELP WOMEN	
PO BOX 40250				20.000
SAN FRANCISCO, CA 94140				30,000.
,				
PLANNED PARENTHOOD - SA STATES	NONE	501(C)(3)	GENERAL OPERATING	
100 SOUTH BOYLAN AVENUE				
RALEIGH, NC 27603				20,000.
PLANNED PARENTHOOD FEDERATION OF	NONE	501(C)(3)	CENTER FOR OUTCOMES	
AMERICA (PPFA)			RESEARCH AND EDUCATION	
123 WILLIAM STREET, 10TH FLOOR				
NEW YORK, NY 10038				500,000.
POWER TO DECIDE	NONE	501(C)(3)	GENERAL OPERATING	
1776 MASSACHUSETTS AVENUE NW, SUITE		501(0,(3,	DENSIGNE OF BRATTING	
200 WASHINGTON, DC 20036	İ			30,000.
				· · · · · · · · · · · · · · · · · · ·
DULA VENIMIEE	l vorm	501/03/23	DROGDAY GYDEST	
RHIA VENTURES 47 KEARNY STREET, #600	NONE	501(C)(3)	PROGRAM SUPPORT	
SAN FRANCISCO, CA 94108				100,000.
Total from continuation sheets				

3 Grants and Contributions Paid During the	fear (Continuation)			
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
,	or substantial contributor	recipient	<u> </u>	
		,		
RHIA VENTURES	NONE	501(C)(3)	MERCK FOR MOTHERS	
47 KEARNY STREET, #600			1	100.00
SAN FRANCISCO, CA 94108	 	 	 	100,00
DULLA MANAGORIA	Love Control	E01/03/33		
RHIA VENTURES 47 KEARNY STREET, #600	NONE	501(C)(3)	BUSINESS CASE PROJECT	
SAN FRANCISCO, CA 94108				154,50
RHIA VENTURES	NONE	501(C)(3)	GENERAL OPERATING	
47 KEARNY STREET, #600			02.12.12.10	
SAN FRANCISCO, CA 94103				2,000,000
RHIA VENTURES	NONE	501(C)(3)	VENTURE FAIR	
47 KEARNY STREET, #600				
SAN FRANCISCO, CA 94108				50,00
- *		Ì		
RHIA VENTURES	NONE	501(C)(3)	PROGRAM SUPPORT	
47 KEARNY STREET, #600				
SAN FRANCISCO, CA 94108	-	<u></u>		2,000
SISTERSONG 1237 RALPH DAVID ABERNATHY BOULEVARD	NONE	501(C)(3)	GENERAL OPERATING	
ATLANTA, GA 30310	,]		50,000
-				
SOCIAL GOOD FUND	NONE	501(C)(3)	TEACH TRAINING	
PO BOX 5473			I I I I I I I I I I I I I I I I I I I	
RICHMOND, CA 94805				5,000
SOCIETY OF FAMILY PLANNING	NONE	501(C)(3)	ABORTION CLINICAL	
255 S. 17TH STREET, SUITE 2709			TRIALS NETWORK	
PHILADELPHIA, PA 19103				200,000
SOUTHERN POVERTY LAW CENTER	NONE	501(C)(3)	GENERAL OPERATING	
400 WASHINGTON AVENUE MONTGOMERY, AL 36104				240
,	1			240
SOUTHERN POVERTY LAW CENTER	NONE	501/0)/3)	CENERAL OPERATIO	
SOUTHERN POVERTY LAW CENTER 400 WASHINGTON AVENUE	HOME	501(C)(3)	GENERAL OPERATING	
MONTGOMERY, AL 36104		[10,000
Total from continuation sheets				

TARA HEALTH FOUNDATION

Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient Foundation show any relationship to Purpose of grant or contribution Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor STITCHING EQUILEAP FOUNDATION) NONE 501(C)(3) GENERAL OPERATING WEESPERSTRAAT 61, 1018 VN AMSTERDAM, NETHERLANDS 150,000. INSTITUTE FOR SUSTAINABLE ECONOMIC NONE 501(C)(3) CENTER FOR BIRTH EDUCATIONAL AND ENVIRONMENTAL DESIGN EQUITY AND INNOVATION 1330 BROADWAY, SUITE 300 OAKLAND, CA 94612 100,000. INSTITUTE FOR SUSTAINABLE ECONOMIC. 501(C)(3) GENERAL OPERATING NONE EDUCATIONAL AND ENVIRONMENTAL DESIGN 1330 BROADWAY, SUITE 300 OAKLAND, CA 94612 100,000. THE FULLER PROJECT NONE 501(C)(3) WOMEN'S HEALTH 1875 CONNECTICUT AVE. NW, 10TH FLOOR INVESTIGATIVE WASHINGTON, DC 20009 REPORTING INITIATIVE 100,000. THE KNIGHTS & ORCHIDS SOCIETY NONE 501(C)(3) GENERAL OPERATING 108 BROAD STREET SELMA, AL 36701 10,000. NONE 501(C)(3) TIDES FOUNDATION THE LAWYERING PROJECT 1014 TORNEY AVE, SAN FRANCISCO SAN FRANCISCO, CA 94219 150,000. TONIIC NONE 501(C)(3) GENERAL OPERATING PO BOX 6866 BEND, OR 97708 33,333. UNIVERSITY OF CALIFORNIA SAN NONE 501(C)(3) RESEARCJ FRANCISCO 2200 POST STREET SAN FRANCISCO, CA 94155 110,000. UNIVERSITY OF CALIFORNIA SAN NONE 501(C)(3) RESEARCH FRANCISCO 2200 POST STREET SAN FRANCISCO, CA 94155 15,000. UNIVERSITY OF CALIFORNIA SAN NONE 501(C)(3) RESEARCH FRANCISCO 2200 POST STREET SAN FRANCISCO, CA 94155 132,000. Total from continuation sheets

3 Grants and Contributions Paid During the		1		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
· · · · · · · · · · · · · · · · · · ·	or substantial contributor	recipient		- 1.
UNIVERSITY OF NORTH CAROLINA CAMPUS BOX 3302	NONE	501(C)(3)	ANNIVERSARY FUND	
CHAPEL HILL, NC 27599				15
				•
UNIVERSITY OF PENNSYLVANIA	NONE	501(C)(3)	CENTER FOR HIGH IMPACT	
3733 SPRUCE STREET			PHILANTHROPY	
PHILADELPHIA, PA 19104				13,50
		,		
UNIVERSITY OF PENNSYLVANIA	NONE	501(C)(3)	CENTER FOR HIGH IMPACT	
3733 SPRUCE STREET			PHILANTHROPY	
PHILADELPHIA, PA 19104			 	100,00
UTAH FILM CENTER	NONE	501(C)(3)	IN SUPPORT OF BELLY OF	
50 W BROADWAY, SUITE 1125 SALT LAKE CITY, UT 84101			THE BEAST FILM	10,00
, , , , , , , , , , , , , , , , , , , ,				
VOTER PÁRTICIPATION CENTER	NONE	501(C)(3)	GENERAL OPERATING	
1707 L STREET NW, #950	NONE	501(0)(3)	SENERAL OFERATING	
WASHINGTON, DC 20036				20,00
VOTER REGISTRATION PROJECT	NONE	501(C)(3)	VOTER ENGAGEMENT WORK	
1300 EYE STREET NW, SUITE 450 EAST				
WASHINGTON, DC 20005				100,000
WEZGETHER	NONE ,	501(C)(3)	GENERAL OPERATING	
167 NORTH MAIN STREET DREW, MS 38737				10,000
		1		· ·
WHITEHEAD INSTITUTE FOR BIOMEDICAL RESEARCH	NONE	501(C)(3)	LEADING EDGE SYMPOSIUM	
455 MAIN STREET				
CAMBRIDGE, MA 02142				25,00
	(
WOMEN'S FOUNDATION OF MISSISSIPPI	NONE	501(C)(3)	GENERAL OPERATING	•
2906 NORTH STATE STREET, SUITE 302				
JACKSON, MS 39216		-		50,00
MCE SOCIAL CAPITAL 5758 GEARY BLVD. #261	NONE	501(C)(3)	MICROFINANCE	
SAN FRANCISCO, CA 94121				17,54
Total from continuation sheets		1	· -	•

Part XV Supplementary Information 3 Grants and Contributions Approved for Fut)		<u></u>		
Recipient If recipient is an individual, show any relationship to Foundation Purpose of grant or any foundation manager status of contribution						
Name and address (home or business)	any foundation manager or substantial contributor	recipient	CONTRIBUTION	Amount		
CARY CHRISTIAN CENTER	NONE	501(C)(3)	GENERAL OPERATING			
154 COTTONWOOD STREET						
CARY, MS 39054				20,00		
•	,					
GYNUITY HEALTH PROJECTS	NONE	501(C)(3)	GENERAL OPERATING			
220 EAST 42ND STREET, #710						
NEW YORK, NY 10017	,			175,00		
THE KNIGHTS & ORCHIDS SOCIETY	NONE	501(C)(3)	GENERAL OPERATING			
108 BROAD STREET						
SELMA, AL 36701	1			10,00		
SISTERSONG	NONE	501(C)(3)	GENERAL OPERATING			
1237 RALPH DAVID ABERNATHY BOULEVARD ATLANTA, GA 30310			`	50,00		
ATHANIA, GA 30310				30,00		
WEZGETHER	NONE	501(C)(3)	GENERAL OPERATING			
167 NORTH MAIN STREET DREW, MS 38737				10,00		
, 32 00,0,				10,00		
GLOBAL DEVELOPMENT INCUBATOR	NONE	E01 (C) (3)	CENTEDAY ODERATING			
1401 K STREET NW, SUITE 900	NONE	501(C)(3)	GENERAL OPERATING			
WASHINGTON, DC 20005		,		100,00		
WOMEN'S FOUNDATION OF MISSISSIPPI	NONE	501(c)(3)	GENERAL OPERATING			
2906 NORTH STATE STREET, SUITE 302						
JACKSON, MS 39216				50,00		
			,			
. ,			<u> </u>			
`						
	<u></u>					
	,					
Total from postinuation should		<u> </u>		415.00		
Total from continuation sheets				415,000		

Part XVI-A	Analysis of	Income-Producing	Activities
------------	--------------------	------------------	-------------------

nter gross amounts unless otherwise indicated.	Unrelated b	usiness income		by section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exemp
1 Program service revenue:	code	Amount	code	Amount	function income
a	_		\perp		
b					
C					
d	_		\perp		
e	_				
f	_				-
g Fees and contracts from government agencies		,, _			
Membership dues and assessments			\bot		
Interest on savings and temporary cash investments					
Dividends and interest from securities			14	2,138,826.	
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			18	319,094.	
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)		().	2,457,920.	····
Total. Add line 12, columns (b), (d), and (e)				13	2,457,9
ee worksheet in line 13 instructions to verify calculations.)				
Part XVI-B Relationship of Activities	s to the Accom	plishment of	Exempt I	Purposes	
ine No. Explain below how each activity for which in	come is reported in c	olumn (e) of Part XV	I-A contribute	ed importantly to the accomp	lishment of
▼ the foundation's exempt purposes (other th				, , , , , , , , , , , , , , , , , , , ,	
	·	··· - · ··			
				······································	
		• • • • • • • • • • • • • • • • • • • •			

	the foundation's exempt purposes (other than by providing funds for such purposes).	
		 .
		- -
┷		 _
	and the same of th	
		.
<u> </u>		
123621 12-17-	Form	990-PF (2019)

Form 990			HEALTH F	_				5645300		age 13
Part 2	XVII			nsfers to a	and Transactions	and Relations	hips With No	ncharitable	;	
1 Did	l the or	Exempt Organ		u of the follows	an with any other arrayant	on decaybed in each			Voc	No
					ng with any other organizat ig to political organizations'		(ion 501(c)		Yes	NO
		from the reporting found				•				
	Cash			auto onompro.	gameanon on			1a(1)		X
. ,		assets						1a(2)		X
b Oth	er tran	sactions:								
(1)	Sales	of assets to a noncharita	able exempt organız	ation				1b(1)		X
		nases of assets from a no	•	organization				1b(2)		Х
		il of facilities, equipment,						1b(3)		X
		bursement arrangements	5					1b(4)	ļ	X
		s or loan guarantees rmance of services or me	emhershin or fundr:	aisina solicitatii	nne			1b(5) 1b(6)		X
		f facilities, equipment, ma	•	-				10(0)		X
	_				edule. Column (b) should a	lways show the fair r	market value of the o		ets.	
or s	service	s given by the reporting f	foundation. If the fo	undation receiv	ed less than fair market val					
		I) the value of the goods,								
(a)Line ni	<u>-</u>	(b) Amount involved	(c) Name		e exempt organization	(d) Description	of transfers, transaction	ons, and sharing ar	rangeme	ents
	+	-	 	N/A	184.					
	+									
	+				 -	-				<u> </u>
-	\top			-						
										-
		<u>_</u>	<u> </u>							
	+									
	+		†				· · ·			
-	+		 .							
	1					 				
					· ·			-		
	Щ.					<u>I</u>				
					or more tax-exempt organ	izations described				_
		501(c) (other than section implete the following sch		ection 5277				Yes	LX	_l No
וו ט	65, 60	(a) Name of org			(b) Type of organization	*	(c) Description of re	lationship		
		N/A			, , , , ,					
						Ť		·· <u>···</u>		
					ļ					
	Under	penalties of penury. I declare	that I have examined the	nis return, includir	ng accompanying schedules and	statements and to the	heet of my knowledge			
Sign	and be	ilef, it is true, correct, and cor	mplete Declaration of p	reparer (other tha	n taxpayer) is based on all infor	nation of which preparer	has any knowledge	May the IRS of return with the	prepare	er
Here		SH-DV	15W		111-2-20	PRESID	ENT	shown below? X Yes	? Se <u>e ins</u>	No.
	Sign	ature of officer or trustee			Date:	Title		- [110
		Print/Type preparer's na	ame	Preparer's s	ignature	Date		PTIN		
בים							self- employed			
Paid Prepa	rer	KAREN VALL			VALLADAO	10/29/20		P00534		
Use C		Firm's name ► FRA	un, KIMEI	ZTATATIA ÇC	со. ппь		Firm's EIN ► 9	4-13410	4 2	
- 	,	Firm's address ▶ 18	01 PAGE I	MILL RO	AD		 			
			_				i			

923622 12-17-19

PALO ALTO, CA 94304

Form **990-PF** (2019)

Phone no. (650) 845-8100

FORM 990-PF	DIVIDENDS	AND INTE	REST	FROM SECUR	ITIES ;	STATEMENT	1
SOURCE	GROSS AMOUNT	CAPITA GAINS DIVIDEN		· (A) REVENUE PER BOOKS	(B) NET INVEST MENT INCOM		
MERRILL LYNCH INTEREST AND DIV	2,138,826.		0.	2,138,826.	2,138,826	•	
TO PART I, LINE 4	2,138,826.		0.	2,138,826.	2,138,826	•	
FORM 990-PF		LEGA	L FE	ES		STATEMENT	2
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAB PURPOSE	
LEGAL		18,000		0.		63	4.
TO FM 990-PF, PG 1,	LN 16A	18,000	 ·	0.		63	4.
FORM 990-PF		ACCOUNT	ING :	FEES		STATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) I INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAB PURPOSE	
ACCOUNTING		19,375	- 	0.		58	9.
TO FORM 990-PF, PG	1, LN 16B	19,375		0.		58	9.
FORM 990-PF	ОТ	HER PROFE	SSIO	NAL FEES		STATEMENT	4
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) I INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAB PURPOSE	
CONSULTANTS FOUNDATION MANAGEME	 Int	600,174 180,000	,	0.		502,88	9.
IT SUPPORT		2,695	1	0.		8	8.
TO FORM 990-PF, PG	1, LN 16C	782,869	- —	0.		508,86	

FORM 990-PF	TAX	ES	<u> </u>	STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL TAXES	136,058.	0.	\	0.
TO FORM 990-PF, PG 1, LN 18	136,058.	0.		0.
FORM 990-PF	OTHER E	XPENSES	S	STATEMENT 6
. DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT EXPENSES	404,952.	404,952.		0.
BOOKS, SUBCRIPTIONS, REFERENCES MEMBERSHIP PRINTING AND COPYING SUPPLIES TELEPHONE WIRE TRANFER FEES D&O INSURANCE WORKERS COMP MISCELLANEOUS EXPENSE	1,478. 43,906. 1,188. 16,724. 3,948. 2,090. 5,088. 2,862. 1,439.	0. 0. 0. 0. 0. 0.		1,261. 37,463. 1,014. 14,270. 3,369. 1,783. 4,341. 2,442. 1,228.
TO FORM 990-PF, PG 1, LN 23	483,675.	404,952.		67,171.
FORM 990-PF OTHER INCREASES DESCRIPTION GAAP FMV ADJUST - UNREALIZED		ETS OR FUND BA	ALANCES S	TATEMENT 7 AMOUNT 11,616,888.
TOTAL TO FORM 990-PF, PART II	I, LINE 3			11,616,888.

FORM 990-PF OT	HER INVESTMENTS		STATEMENT / 8
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
MERRILL LYNCH - SECURITIES AT FMV NEW WAVE IMPACT FUND I (PRIVATE	FMV FMV	68,432,247.	68,432,247.
EQUITY FUND) RH CAPITAL FUND I LP (PRIVATE FUN		201,858. 3,514,736.	201,858. 3,514,736.
TOTAL TO FORM 990-PF, PART II, LI	NE 13	72,148,841.	72,148,841.
FORM 990-PF	OTHER ASSETS		STATEMENT 9
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
ACCRUED INTEREST SECURITY DEPOSIT	99,704. 51,195.	117,973. 51,195.	117,973. 51,195.
TO FORM 990-PF, PART II, LINE 15	150,899.	169,168.	169,168.
FORM 990-PF OT	HER LIABILITIES		STATEMENT 10
DESCRIPTION		BOY AMOUNT	EOY AMOUNT
DEFERRED EXCISE TAX LIABILITY		0.	115,677.
TOTAL TO FORM 990-PF, PART II, LI	NE 22	0.	115,677.

TARA HEALTH FOUNDATION

46-5645300

FORM 990-PF EXPENDITURE RESPONSIBILITY STATEMENT PART VII-B, LINE 5C

STATEMENT

11

GRANTEE'S NAME

GRAB YOUR WALLET ALLIANCE

GRANTEE'S ADDRESS

548 MARKET STREET #54110 SAN FRANCISCO, CA 94104

GRANT AMOUNT

DATE OF GRANT AMOUNT EXPENDED

75,000.

07/10/19

49,472.

PURPOSE OF GRANT

HELP MINIORITIES EXERCISE THEIR ECONOMIC POWER IN WAYS THAT EXPAND OPPORTUNITIES.

DATES OF REPORTS BY GRANTEE

2/1/2020

ANY DIVERSION BY GRANTEE

N/A