Form **990-PF**

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

	Depa	rtment of the Treasury		Go to umov i	social se	curity numbers or orm990PF for ins	in this form as	the latest inf	ade public. formation		Open to Public Inspection
		nal Revenue Service	or tax year beginning	SEP			and e			2019	Open to rabile trispection
		ne of foundation							A Employer iden		umber
	DAVID W. HEARST JR. FOUNDAT								84-310		
		•	ox number if mail is not de					Room/suite	B Telephone num 858-72		1
		or town, state or pro	ovince, country, and ZI	P or foreign p	ostal cod	e			C If exemption appli	cation is pend	ding, check here
		Check all that apply:		ange 1 501(c) <u>(3)</u> ex	empt priv	Initial return of a Amended return Name change vate foundation		narity OU	D 1. Foreign organic check here and	zations meetii I attach comp ation status	ng the 85% test, utation was terminated
	(fi) nonexempt charitable assets at end of year ne 16) 251,000.	J Account	ng metho her (spec	ify)	Accr	- \-	under section 5 If the foundatio under section 5	n is in a 60	month termination
		Analysis of R	evenue and Expenses ounts in columns (b), (c), an il the amounts in column (a	d (d) may not	(a)	Revenue and nses per books	1	vestment ome	(c) Adjusted income	net	(d) Disbursements for charitable purposes (cash basis only)
入		2 Check 3 Interest on saving cash investments	gifts, grants, etc., recei the foundation is not required to s and temporary interest from securities	attach Sch B		251,000.			N//A		
	Revenue	b Net rental income 6a Net gain or (loss) f Gross sales price assots on line 6a	rom sale of assets not on I	ne 10		W 173 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		0.			
	Re	Net short-term Income modific Gross sales less reand allowances	capital gain eations eturns	_				M. H.			
1 0		b Less Cost of good c Gross profit or 11 Other income 12 Total Add lines	(loss)			251,000.		0.			
SCANNED	ses	13 Compensation of other employee 15 Pension plans, 16a Legal fees	-	etc		0.		0.			0.
D NOV 1	rative Expens	b Accounting feesc Other professio17 Interest18 Taxes	•					A065 X	CEIVE Y 2 2 2020		
5 2021	and Administrative	19 Depreciation an20 Occupancy21 Travel, conferer22 Printing and pui	nces, and meetings					l or	יטנא, עו	138	
	Operating a	23 Other expenses24 Total operating	and administrative lines 13 through 23			0.		0.			0.
		26 Total expenses Add lines 24 an	and disbursements. d 25			0.		0.			0.
			from line 12: over expenses and disbur- income (if negative, ente	1		251,000.		0.			
			COME (if negative, enter -0						N/A		

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

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	.==	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End	of year
11.	<u>arτ</u>	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		251,000	251,000.
	2	Savings and temporary cash investments			
		Accounts receivable >	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	7 3 7 7	1,
		Less: allowance for doubtful accounts		,	
	4	Pledges receivable >		1	
		Less: allowance for doubtful accounts		· \dan	·
	5	Grants receivable			<u> </u>
	6	Receivables due from officers, directors, trustees, and other			
	-	disqualified persons			
	7	Other notes and loans receivable		TO THE THE TANK	
	'	Less: allowance for doubtful accounts		Aprilia de la companione de la companion	F
g	8	Inventories for sale or use		<u> </u>	
Assets	1	Prepaid expenses and deferred charges			
As		Investments - U.S. and state government obligations			
	1	Investments - corporate stock			
	1	Investments - corporate bonds	,		f
	Ι.	Investments - land, buildings, and equipment basis	manife sales		F
	l ' '	Less accumulated depreciation			. 1
	12	Investments - mortgage loans			
	13	Investments - other			·
		Land, buildings, and equipment: basis		F-12	
	`	Less accumulated depreciation	<u> </u>	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	<u> </u>
	15	Other assets (describe >		 	
	1	Total assets (to be completed by all filers - see the		·	-
	"	instructions. Also, see page 1, item I)	0.	251,000.	251,000.
	17	Accounts payable and accrued expenses			, , , , , ,
	18	Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	· · · · · · · · · · · · · · · · · · ·		
ΞĠ	21	Mortgages and other notes payable			
Ë	l	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_		Foundations that follow FASB ASC 958, check here			
S		and complete lines 24, 25, 29, and 30.			
alances	24	Net assets without donor restrictions			"o
ala	25	Net assets with donor restrictions			
Net Assets or Fund B		Foundations that do not follow FASB ASC 958, check here			ş,
ᆵ		and complete lines 26 through 30.			10
þ	26	Capital stock, trust principal, or current funds	0.	0.	<u> </u>
ets	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
ISS(28	Retained earnings, accumulated income, endowment, or other funds	0.	251,000.	
et /	29	Total net assets or fund balances	0.	251,000.	
ž					
	30	Total liabilities and net assets/fund balances	0.	251,000.	<u> </u>
i D	art)	Analysis of Changes in Net Assets or Fund B	alances		
		net assets or fund balances at beginning of year - Part II, column (a), line	29		0
		agree with end-of-year figure reported on prior year's return)		1	0.
		amount from Part I, line 27a		2	251,000.
		increases not included in line 2 (itemize)	<u> </u>	3	0.
		nes 1, 2, and 3		4	251,000.
		ases not included in line 2 (itemize)		5	0.
6	otal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 29	6	251,000.
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Part IV, Capital Gains a	nd Losses for Tax on I	nvestme	nt Income				
(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)				(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
1a							
b NON	Έ						
<u>c</u>							
d							
<u>e</u>	(0.0)	1		L	<u> </u>		
(e) Gross sales price	(f) Depreciation allowed (or allowable)		ost or other basis expense of sale		(h) Gain or (loss ((e) plus (f) minus		
a						- -	
<u>b</u>							
d			 				
e							
Complete only for assets showing	gain in column (h) and owned by	the foundation	on on 12/31/69.		(I) Gains (Col. (h) gain	minus	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) E	excess of col. (i) or col. (j), if any	c	ol (k), but not less that Losses (from col. (n -0-) or	
a	······································	1					
b							
С							
d		ļ					
е		<u> </u>	· · · · · · · · · · · · · · · · · · ·			· 	
2 Capital gain net income or (net capi	tal loss) { If gain, also enter of the loss of the los			} 2			
3 Net short-term capital gain or (loss) If gain, also enter in Part I, line 8, co		nd (6):		}			
If (loss), enter -0- in Part I, line 8 Rart V Qualification Un	der Section 4940(e) for	Reduced	Tax on Net	3 Investment in	come		
(For optional use by domestic private for						N/A	
(i or optional use by domestic private it	Junuations Subject to the Section .	4340(a) lax 0	ii iigt iiivestiiiciit iii	come.)		14/11	
If section 4940(d)(2) applies, leave this	part blank.						
Was the foundation liable for the section If "Yes," the foundation doesn't qualify t			•	od?		Yes No	
1 Enter the appropriate amount in each				ntries.			
(a)	(b)		T ,	(c)	Datab	(d)	
Base periód years Calendar year (or tax year beginning	in) Adjusted qualifying dis	tributions	Net value of nor	ncharitable-use asset		Distributión ratio (col. (b) divided by col. (c))	
2018							
2017							
2016							
2015			ļ. <u> </u>				
2014			<u> </u>			··-··	
2 Total of line 1, column (d)				,	2	<u> </u>	
3 Average distribution ratio for the 5-y the foundation has been in existence	· ·	on line 2 by 5.	O, or by the numbe	r of years	3		
4 Enter the net value of noncharitable-	use assets for 2019 from Part X, I	line 5			4		
5 Multiply line 4 by line 3				5			
6 Enter 1% of net investment income	(1% of Part I, line 27b)			-	6		
7 Add lines 5 and 6					7		
8 Enter qualifying distributions from P	art XII, line 4				8		
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	a 1% tax rate.			

b If "Yes," has it filed a tax return on Form 990-T for this year?

5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?

If "Yes," attach the statement required by General Instruction T

6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:

8a Enter the states to which the foundation reports or with which it is registered. See instructions.

· By language in the governing instrument, or

 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?

7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

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Par	t VII-A, Statements Regarding Activities (continued)			
		1	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		X
	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		Х
	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
	The books are in care of ► CARMEN PAUNESCU Telephone no. ► 858-72	20-9	831	
	Located at ► 11455 EL CAMINO REAL, STE. 305, SAN DIEGO, CA ZIP+4 ►92			
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		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	7	r = 7	-
	foreign country			i
Par	t[VII]B] Statements Regarding Activities for Which Form 4720 May Be Required	1+	72	19.2.
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	1	Yes	No
	During the year, did the foundation (either directly or indirectly):		<u></u>	Ē7-
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	.		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			Í
	a disqualified person?			1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?].	
,	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	 		,
	(5) Transfer any income or assets to a disqualified person (or make any of either available	} . {	•	, '
,	for the benefit or use of a disqualified person)?	1	}	
	(6) Agree to pay money or property to a government official? (Exception, Check "No"	K : I		
'	if the foundation agreed to make a grant to or to employ the official for a period after	1		, 4
	termination of government service, if terminating within 90 days.)		[]	7 (
ъι	f any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		,	17
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here	-	r	-
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		ì ""	
	pefore the first day of the tax year beginning in 2019?	1c		X
	Faxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	7 0	[
	defined in section 4942(j)(3) or 4942(j)(5))		[4	
	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines	$\ \cdot\ $		
	6d and 6e) for tax year(s) beginning before 2019?	[i 4	[.:]	\$ *1
	f "Yes," list the years ▶ , , , ,	<u> </u>	i :	
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			.]
	N/A	2b		
	f the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	577	7	13.1
				}
3а Г	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			į i
	during the year? Yes X No			
	f "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			†
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,	[∷]	! ,]	
	Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A	3b		لبسبغيثهم
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	一十	X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	7	, 	r wil
	and not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		X
		m 990	-PF	2019)

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DAVID W. HEARST JR. FOUNDATION

Part VII-B) Statements Regarding Activities for Which	Form 4/20 May Be	Requirea (contir	nued)	
5a During the year, did the foundation pay or incur any amount to:				Yes No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section)			es 🗶 No 📑	
(2) Influence the outcome of any specific public election (see section 4955),	or to carry on, directly or indire		[]	
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purpose	98?	L Y	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organizati	on described in section			
4945(d)(4)(A)? See instructions		Y	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary	y, or educational purposes, or f	for	[
the prevention of cruelty to children or animals?	•		es 🗶 No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	nder the exceptions described i	ın Regulations		
section 53 4945 or in a current notice regarding disaster assistance? See inst	tructions .		N/A	5b
Organizations relying on a current notice regarding disaster assistance, check	k here		▶ ∟	京部 北江
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption]	
expenditure responsibility for the grant?	N	Ī/Ā	es L No	- #1 -#1 *뒤
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			;	. # . # . : }
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		,	
a personal benefit contract?		Y	es X No	أحنك أأسط أحث
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		Ŀ	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	shelter transaction?	. [] Y	es 🗶 No 🚶	<u></u>
b If "Yes," did the foundation receive any proceeds or have any net income attrib	outable to the transaction?		N/A	7b
8 Is the foundation subject to the section 4960 tax on payment(s) of more than	\$1,000,000 in remuneration or		[
excess parachute payment(s) during the year?			es 🗶 No 💃	
Rart,VIII Information About Officers, Directors, Trus Paid Employees, and Contractors	tees, Foundation Ma	nagers, Highl	у	
1 List all officers, directors, trustees, and foundation managers and	their compensation.			
	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	enter -0-)	and delerred compensation	allowances
DAVID W HEARST, JR.	PRESIDENT]	
11455 EL CAMINO REAL, STE 305				}
SAN DIEGO, CA 92130	0.00	0.	0.	0.
ANTHONY ROWE	SECRETARY			
11455 EL CAMINO REAL, STE 305				
SAN DIEGO, CA 92130	0.00	0.	0.	0.
MICHAEL LAFEVER	TREASURER			
11455 EL CAMINO REAL, STE 305				
SAN DIEGO, CA 92130	0.00	0.	0.	0.
		-		}
				<u> </u>
2 Compensation of five highest-paid employees (other than those in	T	enter "NONE."	(74)	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address of dath employee paid more state questions	devoted to position	(0) 00	and deferred compensation	allowances
NONE				
	」			
			· <u>-</u>	
	_			
				<u> </u>
Total number of other employees paid over \$50,000 .	· · · · · · · · · · · · · · · · · · ·		▶	0
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 $\overline{\blacksquare}$

Total. Add lines 1 through 3

All other program-related investments. See instructions.

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign for	undations, see	nstructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	24,369
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	24,369.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d .	3	24,369.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	366.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	24,003.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	342.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations, check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	342.
	Tax on investment income for 2019 from Part VI, line 5		
	Income tax for 2019. (This does not include the tax from Part VI.)		
	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	342.
4	Recoveries of amounts treated as qualifying distributions .	4	0.
5	Add lines 3 and 4	5	342.
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 XIII, line 1	7	342.
P	Qualifying Distributions (see instructions)	Late and	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		0
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	0.
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, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	0.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		•
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for the	section

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI,	1	,	· · · · · · · · · · · · · · · · · · ·	342.
line 7	- 4-	*** *** ** ** ** ** ** ** ** ** ** ** *		J 12 (
2 Undistributed income, if any, as of the end of 2019			0.	
a Enter amount for 2018 only		T demands in our bet	• • •	
b Total for prior years:		0	, '	1
		0.		
3 Excess distributions carryover, if any, to 2019:	l			-
a From 2014	ľ		I	<u> </u> '
b From 2015				
c From 2016	,			
d From 2017	<u>`</u>			
e From 2018],	۱. ما المالية المالية المالية المالية المالي		
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2019 from				
Part XII, line 4: ►\$ 0.				
a Applied to 2018, but not more than line 2a			0.	
b Applied to undistributed income of prior	-			F 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
years (Election required - see instructions)]	0.		
c Treated as distributions out of corpus			and the second s	-
(Election regulared see instructions)	0.		}]
d Applied to 2019 distributable amount		},	<u> </u>	0.
• •	0.	T	1	
e Remaining amount distributed out of corpus	0.		0 -50x =	<u> </u>
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:	_		4	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			Mile Manage months on a Wallet was
b Prior years' undistributed income. Subtract	a ا ند مها ۲۰۵۵-۱۹۵۵ نیزینی		• • •	
line 4b from line 2b	and the second of the second o	0.	L	
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	, -	0.		ı ş
d Subtract line 6c from line 6b. Taxable	1			
amount - see instructions	<i>'</i>	0.		
e Undistributed income for 2018. Subtract line			10 00 00 00 000	1
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract	**			No. 10-10-10-10-10-10-10-10-10-10-10-10-10-1
lines 4d and 5 from line 1. This amount must		٠	1	
be distributed in 2020				342.
7 Amounts treated as distributions out of	<u> </u>	<u> </u>	And the second of the second o	
•	ľ			
corpus to satisfy requirements imposed by		:	•	
section 1/0(b)(1)(F) or 4942(g)(3) (Election	0.	,		,
may be required - see instructions)		2 7 3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		,
8 Excess distributions carryover from 2014	0.			;
not applied on line 5 or line 7	U • [<u> </u>	par - araber - giral t
9 Excess distributions carryover to 2020.	ر ۱		;	<u> </u>
Subtract lines 7 and 8 from line 6a	0.		<u> </u>	
IO Analysis of line 9:			1	`
a Excess from 2015	ļ	']		
b Excess from 2016	, <u> </u>	!	i	
c Excess from 2017				1
d Excess from 2018	,			
e Excess from 2019				
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Form 990-PF (2019) DAVID V	. HEARST JE	R. FOUNDATIO	ON	84-31	.04245 Page 1
Part XIV Private Operating I				N/A	
1 a If the foundation has received a ruling	or determination letter tha	it it is a private operating			
foundation, and the ruling is effective fo	or 2019, enter the date of	the ruling	>		
b Check box to indicate whether the foun	dation is a private operati	ng foundation described	n section	4942(j)(3) or 4942(j)(3)	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4, for each year listed]		İ
d Amounts included in line 2c not					· · · · · · · · · · · · · · · · · · ·
used directly for active conduct of]
exempt activities					
e Qualifying distributions made directly				 	
for active conduct of exempt activities.					
Subtract line 2d from line 2c		Ì			
3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter: (1) Value of all assets					
• •					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter		-/-			
2/3 of minimum investment return		/			
shown in Part X, line 6, for each year listed]	/			
c "Support" alternative test - enter:	<u> </u>	/		 	
(1) Total support other than gross	/	1			
investment income (interest,	/				
dividends, rents, payments on	/				
securities loans (section					
512(a)(5)), or royalties)		-			
(2) Support from general public and 5 or more exempt					
organizations as provided in	/				
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from	/				
an exempt organization	/		· ···		
(4) Gross investment income Part XVI Supplementary Info	rmotion (Comple	to this part only	f the foundation	had \$5,000 or me	ro in accoto
at any time during t			i the loundation	i nau \$5,000 or me	ne in assers
<u></u>		<u>uctions.j</u>			
Information Regarding Foundation a List any managers of the foundation wh	-	*h 00/ -f the total	مطفييط الممسمون وواستفييط	. fadation bafasa the alas	
vear (but only if they have contributed in			ioutions received by the	HODITOZUON DETOTE UTE CIOS	e of ally lax
. , , ,					
NONE	100/ of th	a at-al-af-a agraemtes d	ar an aqually large ports	as of the supprehus of a se	
b List any managers of the foundation wh other entity) of which the foundation has			or an equally large porti	on of the ownership of a pa	rtnersnip or
NONE	s a 1070 or grouter interes	,			
		0.1.1.1.1.2.2			
2 Information Regarding Contributi		•			anta farificada 16
Check here LX if the foundation of the foundation makes gifts, grants, etc.,					ests for funds. If
a The name, address, and telephone num	ber or email address of th	e person to whom applica	itions should be addres	sed:	
					
b The form in which applications should b	e submitted and informat	ion and materials they sho	ould include:		
6 Any cultimerion deadlines					·
c Any submission deadlines					
d Any restrictions or limitations on awards	s, such as by geographica	l areas, charitable fields, k	ands of institutions, or o	other factors:	
-	·	•	•		

Page 11

Part XV ₁ Supplementary Informa				
3 Grants and Contributions Paid During t	he Year or Approved for Future F	Payment	Γ	
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	Toolpiont		
and being me year				
NONE				
NONE				
	ľ			
			Į	
				
	İ			
Total			▶ 3a	I
b Approved for future payment				
NONE				
		İ		
Total			▶ 3b	
			Fo	rm 990-PF (201

Part XVI-A Analysis of Income-Prod	ucing Activition	es		***	
Enter gross amounts unless otherwise indicated.		ousiness income		oy section 512, 513, or 514	(e)
1 Program convice revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	Code		1 5500		
a b			+		
C			++		
d			1 1		
е	-		 		
f	_		+ - + -		
g Fees and contracts from government agencies		· · · · · · · · · · · · · · · · · · ·	1		
2 Membership dues and assessments			 		-
3 Interest on savings and temporary cash			 		
investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate.		54 C			
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory .					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			<u> </u>		
11 Other revenue:					
a					
b	-				
C	-				
d	-		 		
6		0.	-	0.	0.
12 Subtotal. Add columns (b), (d), and (e)	1 mm mag -	U •	المحموا		0.
13 Total. Add line 12, columns (b), (d), and (e)				13	<u> </u>
(See worksheet in line 13 instructions to verify calculations.) Part XVI-B: Relationship of Activities	to the Accom	enlishment of F	remnt Pi	irnosas	
Line No. Explain below how each activity for which income the foundation's exempt purposes (other than	n by providing funds	for such purposes).	Contributed	importantly to the accomp	iisiiment oi
			<u>-</u>	·	
					
					·
					

Form **990-PF** (2019)

923621 12-17-19

	•				
Form 99	0-PF (2019) DAVII	W. HEARST JR	. FOUNDATION	84	1-3104245 Page 13
Part			to and Transactions ar	nd Relationships With N	loncharitable
	Exempt Organ				I to The all Na
			lowing with any other organization	n described in section 501(c)	Yes No
			lating to political organizations?		
	insfers from the reporting found	ation to a noncharitable exemp	pt organization or;		$\frac{1}{1a(1)}$
٠,	Cash Other assets	•			1a(1) X 1a(2) X
	ier transactions:		•		2 111 1 1
	Sales of assets to a noncharita	ble exempt organization			1b(1) X
	Purchases of assets from a no	· -	on		1b(2) X
	Rental of facilities, equipment,		•		1b(3) X
	Reimbursement arrangements				1b(4) X
(5)	Loans or loan guarantees				1b(5) X
٠,	Performance of services or me	·			1b(6) X
	aring of facilities, equipment, ma				1c X
	•		, ,	ays show the fair market value of the	-
	services given by the reporting t umn (d) the value of the goods,			e in any transaction or sharing arrai	igement, snow in
(a)Line n			table exempt organization	(d) Description of transfers, transa	actions, and sharing arrangements
(-,	(-)	N/		(-,,	
			 		
				<u> </u>	
			<u></u>		
_					
				ļ	
	· ·	•	one or more tax-exempt organiza	itions described	Yes X No
	ection 501(c) (other than sectio		,		L Yes LX_ No
B II Y	es," complete the following scho (a) Name of org		(b) Type of organization	(c) Description of	f relationship
	N/A		(-) -)	(-/	
					
				· · · · · · · · · · · · · · · · · · ·	
		1			
]				atements, and to the best of my knowled tion of which preparer has any knowledge	
Sign Here	1/2/1/1	11/1/1	101-1-	L	shown below? See instr
1010	Signature of officer or trustee	//// V	1.5/12/2a	DIRECTOR Title	X Yes No
- 1	- organitate or officer or tradite?	•	Date	i itilo	

(562)435-1191 Form **990-PF** (2019)

P00290163

PTIN

Firm's EIN ▶ 95-3001179

Check self- employed

Phone no.

Paid

Preparer

Use Only

Preparer's signature

LONG BEACH, CA 90801-0087

JOHN L. DI CARLO

Date

04/29/20

Print/Type preparer name

JOHN L. DI CARLO

Firm's name ► WINDES, INC.

Firm's address ▶ P.O. BOX 87

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.
➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019

Name of the organization

Employer identification number

D	AVID W. HEARST JR. FOUNDATION	84-3104245						
Organization type (check	one)·							
Filers of: Section:								
Form 990 or 990-EZ	501(c)() (enter number) organization							
4947(a)(1) nonexempt charitable trust not treated as a private foundation								
	527 political organization							
Form 990-PF	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
Note: Only a section 501(c	is covered by the General Rule or a Special Rule.)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ile. See instructions.						
General Rule								
•	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling yone contributor. Complete Parts I and II. See instructions for determining a contributor	•						
Special Rules								
sections 509(a)(1) any one contribut	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amou Z, line 1 Complete Parts I and II	or 16b, and that received from						
year, total contrib	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III							
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.								
but it must answer "No" or	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fo i Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fo the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)							

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

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

Name of organization

Employer identification number

DAVID	W.	HEARST	JR.	FOUNDATION

DAVID	W. HEARST JR. FOUNDATION	8	4-3104245
(Partil)	Contributors (see instructions) Use duplicate copies of Part I if addition	onal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DAVID W HEARST, JR. 11455 EL CAMINO REAL, STE 305 SAN DIEGO, CA 92130	\$\$251,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

DAVID W. HEARST JR. FOUNDATION

84-3104245

	W. HEARST JR. FOUNDATION		1-3104245
art II	Noncash Property (see instructions) Use duplicate copies of P	art II if additional space is needed	_
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received

Employer identification number Name of organization 84-3104245 DAVID W. HEARST JR. FOUNDATION Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift (d) Description of how gift is held from (b) Purpose of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4