Form **990-PF**

Return of Private Foundation

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

OMB No. 1545-0047 2019

Department of the Treasury Internal Revenue Service

▶ 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.

Open to Public Inspection

			<u>idar year 2019 or tax year be</u>	ginning_	Aug 1	<u>, 2019, a</u>	and endi	ng	Jι	11 31 , 20 2	20
	Nam	ne of fou	ndation		.		AE	Employe	er identification number	er	
	HE.	ISER	FOUNDATION					94-6	064977		
	Num	ber and	street (or P.O. box number if mail is no	ot delivered to street address)		Room/su	ite B 1	elephor	e number (see instructi	ons)	
	11	55 W	. WALNUT STREET					(209) 463-4363		
			, state or province, country, and ZIP or	foreign postal code			C I		tion application is pend	ına, check he	re ▶ □
	ST	OCKTO	ON CA 95203					CACITIP	aon appadaton to pond	ing, oncorrio	
			all that apply: Initial retu	ırn	n of a former	oublic ch	arity D 1	Foreign	n organizations, check	hara	►□
	_	000	☐ Final retu			345.13 311					_
			☐ Address				2		n organizations meeting here and attach compu		it, · ▶ [_]
		Check	type of organization: X Se			ation () 4 E II		foundation status was		
			n 4947(a)(1) nonexempt charit				, A I		07(b)(1)(A), check here		▶ 🗆
			narket value of all assets at	J Accounting method			ual				
			f year (from Part II, col. (c),	Other (specify)					ndation is in a 60-mont ction 507(b)(1)(B), checl		
		line 16		(Part I, column (d), must be	e on cash basi	s.)					
		art I	Analysis of Revenue and Ex		T		1			(d) Disburse	ments
_			amounts in columns (b), (c), and (d)		(a) Revenue expenses p		Net inves		(c) Adjusted net	for charita	able
3,			the amounts in column (a) (see insti	ructions))	books		moonie		income	(cash basis	
\mathcal{L}		1	Contributions, gifts, grants, etc.,	received (attach schedule)							
4		2	Check ► ☑ if the foundation is r			$\overline{}$					
		3	Interest on savings and temp	•		- 					
		4	Dividends and interest from s	•	1,7	94.	1	794.	1,794.		
		5a	Gross rents					, , , ,	1,751.		一
		ь	Net rental income or (loss)								
_	ø	60	Net gain or (loss) from sale of	f assets not on line 10	1	14.					\dashv
22	Revenue	b	Gross sales price for all assets on		<u> </u>		-6a Str	n t			-i
20	Ve	7	Capital gain net income (from			- 1		114.			\rightarrow
ග	Re	8	Net short-term capital gain .	-				114.	114.	-	
		9	· · · · · · · · · · · · · · · · · · ·						114.		
4		10a	Gross sales less returns and allow	1							-
Ž		ь	Less: Cost of goods sold .								
Ω		C	Gross profit or (loss) (attach s								
Щ		11	Other income (attach schedu								
É		12	Total. Add lines 1 through 11		1,9	08	1	908.	1,908.	 	
SCANNED MAR 1 9 2022	_	13	Compensation of officers, dir		1, 9	00.		500.	1,000.		'
	es	14	Other employee salaries and								
•	ns	15	Pension plans, employee ber			· · ·		-			
	tpe	16a	Legal fees (attach schedule)							-	
	ш	b	Accounting fees (attach sche	dule) L-16b Stmt	1,8	an					
	Ve	C	Other professional fees (attac			90.			- ::		
	ati	17	Interest			50.					
	str	18	Taxes (attach schedule) (see			69.					
	Ξ	19	Depreciation (attach schedule	·		03.			DEOEN'S	7	 1
	ᄩ	20	Occupancy	-				\neg	RECEIVE		<u> </u>
	ĕ	21	Travel, conferences, and mee					3		21 32	
	밀	22	Printing and publications .	-	-	74.		74		121 51	
	Operating and Administrative E	23	Other expenses (attach sche			 		- 14	}		
	Ĕ	24	Total operating and adm	·					OGDEN,		
	ā		Add lines 13 through 23		2,3	23		74.	OGDEIN,	<u> </u>	
	be	25	Contributions, gifts, grants pa		3,0			,			
	0	26	Total expenses and disbursem		5,4			74.			
	\dashv	27	Subtract line 26 from line 12:					,			 1
			Excess of revenue over expen		-3,5	12					
		b	Net investment income (if n		-3,3	14.	1	834.	-		
			Adjusted net income (if negatives				Τ,	0 0 4 .	1,908.	_	
		•		, -··· • <i>j</i>	i	- 1			1,200.		- 1

Pa	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		End o	of year
		should be for end-of-year amounts only (See instructions.)	(a) Book Value	(b) Book Val	ne	(c) Fair Market Value
	1	Cash-non-interest-bearing	16,223.	13,3	367.	13,367.
	2	Savings and temporary cash investments	46,342.		96.	
	3	Accounts receivable ▶0.				
		Less: allowance for doubtful accounts ▶	110.		0.	0.
	4	Pledges receivable ▶				
		Pledges receivable ►	·			
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
	"	disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule)			$\overline{}$	
	′	Less. allowance for doubtful accounts ▶				
S		Inventories for sale or use				
Assets	8					
SS	9	Prepaid expenses and deferred charges	-			
⋖	10a	Investments—U.S. and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)	61,238.	61,2	38.	70,941
	C	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment: basis ▶				
		Less. accumulated depreciation (attach schedule) ▶				
	12	Investments—mortgage loans				
	13	Investments – other (attach schedule)				
	14	Land, buildings, and equipment: basis ▶				<u></u>
		Less. accumulated depreciation (attach schedule) ▶				
	15	Other assets (describe ►)				
	16	Total assets (to be completed by all filers—see the				
		ınstructions. Also, see page 1, item l)	123,913.	120,4	01.	130,104.
	17	Accounts payable and accrued expenses				
S	18	Grants payable				
ë	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
ä	21	Mortgages and other notes payable (attach schedule)		· -		
┙╽	22	Other liabilities (describe ▶)				
	23	Total liabilities (add lines 17 through 22)				
ŝ		Foundations that follow FASB ASC 958, check here				
Balances		and complete lines 24, 25, 29, and 30.				
a	24	Net assets without donor restrictions				
Ba	25	Net assets with donor restrictions		-		
ַ		Foundations that do not follow FASB ASC 958, check here ▶ 🗵				
Fund		and complete lines 26 through 30.				
or F	26	Capital stock, trust principal, or current funds				
ွှ	27	Paid-in or capital surplus, or land, bldg., and equipment fund		·		
ë	28	Retained earnings, accumulated income, endowment, or other funds	123,913.	120,4	01	
SS	29	Total net assets or fund balances (see instructions)	123,913.	120,4		
וצ	30	Total liabilities and net assets/fund balances (see	123, 513.	120, 1	<u> </u>	
Net Assets		Instructions)	123,913.	120,4	.01	
	rt III	Analysis of Changes in Net Assets or Fund Balances	160,910.	120,4	<u></u>	
_			mp (a) line 20 (milet	agree with		<u> </u>
1		al net assets or fund balances at beginning of year—Part II, colu -of-year figure reported on prior year's return)			1	123,913.
^		· · · · · · · · · · · · · · · · · · ·			-	
_		er amount from Part I, line 27a			2	-3,512.
3		er increases not included in line 2 (itemize)			3	120 401
_		lines 1, 2, and 3		• • •	4	120,401.
5		reases not included in line 2 (itemize) FTB PENTALTY	Double only on the	. 20	5	120 401
n	เกเล	u nei asseis or iuno palances al eno ot vear lline 4 minus line 5)—l	ear ii commin do line	- / 3		

		nd(s) of property sold (for example, real e use, 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	CAPITAL GAINS			P	S/T	12/31/2019
b						
c				<u> </u>		
d						
e	· · · · · ·		T	<u> </u>		<u></u> .
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis inse of sale		ın or (loss) (f) mınus (g))
a	114.			0.		114.
b		=				
С	_			· · · · ·		
<u>d</u>						
e				10/01/00	-	
	Complete only for assets sho	owing gain in column (h) and owned	by the foundation	on 12/31/69.		l (h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) . (j), if any		ot less than -0-) or from col. (h))
а	0.	0.		0.		114.
b						
С						
d						
е						
2	Capital gain net income o		also enter in Pa , enter -0- ın Paı		2	114.
3		n or (loss) as defined in sections I, line 8, column (c). See instru				
	Part I, line 8				3	114.
Part	V Qualification Und	ler Section 4940(e) for Redu	iced Tax on N	let Investment	Income	
Was t		e this part blank. section 4942 tax on the distribu qualify under section 4940(e). Do			base period?	⊠ Yes □ No
1		ount in each column for each yea			aking anv entries.	
Cale	(a) Base period years endar year (or tax year beginning in	(b)		(c) f noncharitable-use a	Dis	(d) tribution ratio divided by col (c))
	2018				`	
	2017					•
	2016					
	2015					
	2014					
2	Total of line 1, column (d)				. 2	
3	• • •	for the 5-year base period—div				
J		oundation has been in existence				
4	Enter the net value of non	charitable-use assets for 2019 f	rom Part X, line	5	. 4	
5	Multiply line 4 by line 3				. 5	· · · · · · · · · · · · · · · · · · ·
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)		. 6	
7	Add lines 5 and 6				. 7	
8		ons from Part XII, line 4				
	If line 8 is equal to or great Part VI instructions.	ater than line 7, check the box in	n Part VI, line 1b	, and complete	that part using a	1% tax rate. See the

table for fulling or determination letter. [attach copy of letter if necessary—see instructions) b Domestic foundations that meet the section 4940(p) requirements in Part V, check here ▶ [and other 1940 of Part I, line 27b. c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 27b. c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12 co.0 (b) 2 Tax urider section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 3 Add lines 1 and 2 . 3 3 3.7. Subtitle A fincome) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero roless, enter -0 5 Tax based on investment income. Subtract line 4 from line 3. If zero roless, enter -0 5 Tax based on investment income. Subtract line 4 from line 3. If zero roless, enter -0 5 Tax paid with application for extension of time to file (Form 886s) 6 Exempt foreign organizations—tax withheld at source 6 Tax paid with application for extension of time to file (Form 886s) 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for undergrayment of estimated tax. Check here ☐ if Form 2220 is attached 8 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 1 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 1 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 1 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 1 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 1 Tax due. If the total of lines 5 and 8 is more than line 10 line 5 total 6 lines 5 and 8, enter the amount overpaid 1 Tax due. If the total of lines 5 and 8 is more than line 10 line 10 line 5 total 6 lines 5 and 8, enter the amount overpaid 1 Tax due. If the total of lines 5 and 8 is more than line 10 line 10 line 10	Part '		nstru	ction	ns)
b Domestic foundations that meet the section 494(p) requirements in Part V, check here \times		Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1.)			
b Domestic foundations that meet the section 494(p) requirements in Part V, check here \times		Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)			
nere ► □ and enter 1% of Part I, line 27b. c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b) Tax unider section 61 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-) Tax based with application for extension of time to file (Form 8868) Backup withholding erroneously withheld Total credits and payments. Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here □ if Form 2220 is attached Backup withholding erroneously withheld Total credits and payments. Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Backup withholding erroneously withheld Total credits and payments. Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Backup withholding erroneously withhold at source Tax bud, If the total of lines 5 and 8 is more than the total of lines 5 and 8, enter the amount overpaid Dourng the tax year, did the foundation flavol of lines 5, and 8, enter the amount overpaid Dourng the tax year, did th	b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			37.
Part I, line 12, col. (b) 2 Tax unider section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 3 Add lines 1 and 2 3 J 37. 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 5 Tax based on investment income. Sulptract line 4 from line 3. If zero or less, enter -0- 5 J 37. 6 Credits/Payments: 2019 estimated tax payments and 2018 overpayment credited to 2019 6 B		here ▶ □ and enter 1% of Part I, line 27b			Ī
2 3 Add lines 1 and 2 3 3.7. 3 Add lines 1 and 2 3 3.7. 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-3 5 Tax based on investment income. Subtract line 4 from line 3. if zero or less, enter -0-5 5 Credits/Payments: a 2019 estimated tax payments and 2018 overpayment credited to 2019 6a b Exempt foreign organizations—tax withheld at source 6b b Exempt foreign organizations—tax withheld at source 6b d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 s attached 8 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owned ▶ 9 3.7. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount ownerpaid ▶ 10 0. 10 Interting a mount of line 10 to be. Credited to 2020 estimated tax ≥ Market and the second of the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation his Form 1120-POL for this year? d Enter the amount (if any) and by the foundation with the activities and copies of any materials published or distributed by the foundation with the activities. 1 Has the foundation his Form 1120-POL for this year? 2 Has the foundation his Form 1120-POL for this year? 4 Has the foundation managers ≥ \$ 2 Has the foundation manager in any activities that have not previously been reported to the IRS, in its governing instrument, articles of incorporation, or bylaxy, or other similar instruments? If "Yes," attach a detailed description of the activitie	С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of			
3 37. Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-	2				0.
Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-	_	, , , , , , , , , , , , , , , , , , , ,			
Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 - 5 37. Credits/Payments:	_	7.00 11100 1 2110 1 1 1 1 1 1 1 1 1 1 1 1			
6 Credits/Payments: a 2019 estimated tax payments and 2018 overpayment credited to 2019 . 6a b Exempt foreign organizations—tax withheld at source . 6b c Tax pard with application for extension of time to file (Form 8868) . 6c d Backup withholding erroneously withheld . 6d Total credits and payments. Add lines 6a through 6d Backup withholding erroneously withheld . 7 Total credits and payments. Add lines 6a through 6d Backup withholding erroneously withheld . 8d Total credits and payments. Add lines 6a through 6d Backup withholding erroneously withheld . 8d Total credits and payments. Add lines 6a through 6d Backup withholding erroneously withheld . 8d Total credits and payments. Add lines 6a through 6d Backup withholding erroneously withheld . 8d Total credits and payments. Add lines 6a through 6d Backup 6d Backup withholding erroneously withheld . 8d Total credits and payments. Add lines 6a through 6d Backup withholding erroneously withheld . 8d Total credits and payments. Add lines 6a through 6d Backup withholding erroneously withholding erroneou	_	——————————————————————————————————————			
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b Exempt foreign organizations—tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 8 Tax due, if the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due, if the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2020 estimated tax ► Refunded ► 11 Part VIIA 12 Statements Regarding Activities 1a Dungs the tax year, did the foundation attempt to influence any national, state, or local legislation or did it instructions for the definition 15 If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 1 Did the foundation hill by the foundation attempt to influence any national, state, or local legislation or did it is instructions for the definition 1 If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 2 Did the foundation file Form 1120-POL for this year? 3 Has the foundation managers. ► \$ 4 Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ 5 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 1 If "Yes," attach the statement required by General Instruction of 1 If "Yes," attach a conformed copy of the changes 2 If "Yes," attach the statement required by General Instruction of 1 If "Yes," attach he st	_				
c Tax paid with application for extension of time to file (Form 8868)	-				
d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		· · · · · · · · · · · · · · · · · · ·			
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Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 7 ax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 7 ax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 8 37. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 0. 11 Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ Refunded ▶ 11 Part VII-A Statements Regarding Activities 1 Dung the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1 Dung the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 2 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition 1 If the answer is "Yes" to 1 a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation undersometion with the activities. 2 Did the foundation file Form 1120-POL for this year? 3 Cheff the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 3 Cheff the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 2 Last the foundation engaged in any activities that have not previously been reported to the IRS? 3 Last the foundation mapagers. ▶ \$ 4 Last the foundation mapagers. ▶ \$ 4 Last the foundation and any cativities that have not previously been reported to the IRS? 3 Last the foundation have unrelated business gross income of \$1,000 or more during the year? 4 Last the foundation have unrelated business gross income of \$1,000 or more during the year? 5 X 1 If "Yes," ast the statement required by <i>General Instruction T</i> ? 4 Are the requirements of section 5096(e) (relating to se					
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	_				
0 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				_	37.
The the amount of line 10 to be: Credited to 2020 estimated tax ▶ Refunded ▶ 11 Part VII-A Statements Regarding Activities					
Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 2 Has the foundation engaged in any activities that have not previously been reported to the IRS?					
Duning the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition if the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities and copies of any materials published or distributed by the foundation on connection with the activities and copies of any materials published or distributed by the foundation on connection with the activities and copies of any materials published or distributed by the foundation of \$450\$ imposed during the year: (1) On the foundation \$					
participate or intervene in any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities and copies of any materials published or distributed by the foundation in connection with the activities and copies of any materials published or distributed by the foundation in connection with the activities and copies of any materials published or distributed by the foundation in connection with the activities and copies of any materials published or distributed by the foundation with the activities and copies of any materials published or distributed by the foundation with the activities and copies of any materials published or distributed by the foundation with the activities and copies of any materials published or distributed by the foundation with the activities and copies of any materials published or distributed by the foundation with the activities and copies of any materials published or distributed by the foundation with the activities and copies of any materials published or distributed by any materials published or distributed by any materials published or distributed by any published or foundation managers. ▶ \$ 1 c				Yes	No
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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?	4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a]	×
If "Yes," attach the statement required by <i>General Instruction T</i> . 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory 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 8a Enter the states to which the foundation reports or with which it is registered. See instructions. 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 <i>General Instruction G?</i> If "No," attach explanation	b		4b		
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 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?		· · ·			[
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conflict with the state law remain in the governing instrument?		By language in the governing instrument, or			
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Ba Enter the states to which the foundation reports or with which it is registered. See instructions. ▶ 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		conflict with the state law remain in the governing instrument?	6		<u>×</u>
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 <i>General Instruction G?</i> If "No," attach explanation 8b × 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	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	7	×	
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 <i>General Instruction G?</i> If "No," attach explanation	8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶			
(or designate) of each state as required by <i>General Instruction G?</i> If "No," attach explanation	b				
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	-		8b	×	
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	9				
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	-				
			9		<u>×</u>
nomes and addresses	10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		×

Par	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		×
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	12		
13	person had advisory privileges? If "Yes," attach statement. See instructions	13	×	×
	Website address ► N/A			L
14	The books are in care of ► BARBARA HEISER Telephone no. ► (209)	463-	4363	
	Located at ► 1155 W. WALNUT STREET STOCKTON CA ZIP+4 ► 95203	-163	8	· <u></u>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here		•	▶ ⊔
16	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority		Yes	No
10	over a bank, securities, or other financial account in a foreign country?	16	1.03	×
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
D.	the foreign country ▶	<u> </u>		
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	т	V	T N.
1a	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. During the year, did the foundation (either directly or indirectly):	<u> </u>	Yes	No
ıa	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(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? ☐ Yes ☑ No (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)?			
	(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			
b	termination of government service, if terminating within 90 days.)			
Б	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .	1b		
	Organizations relying on a current notice regarding disaster assistance, check here ▶ □			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
0	were not corrected before the first day of the tax year beginning in 2019?	1c		×
2	operating foundation 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?			
	6d and 6e) for tax year(s) beginning before 2019?			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ 20, 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "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.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		×
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?			لــِـا
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Part	VII-B	Statements Regarding Activities	s for W	Vhich Form	4720	May Be F	Require	ed (contii	nued)			
-5a	During the	e year, did the foundation pay or incur	any am	ount to:				•			Yes	No
	(1) Carry	on propaganda, or otherwise attempt t	to influe	ence legislation	on (sect	tion 4945(e))? .	☐ Yes	⊠ No			
		nce the outcome of any specific public		on (see sect	ion 495	5); or to c	arry on	,				
	dırectl	y or indirectly, any voter registration dr	ive?					☐ Yes	⊠ No	.		
	(3) Provid	le a grant to an individual for travel, stu	idv. or e	other similar	purpos	es?		☐ Yes	⊠ No	.		
		le a grant to an organization other than						<u> </u>	_			
		n 4945(d)(4)(A)? See instructions						☐Yes	⊠ No	.		
	(5) Provid	le for any purpose other than religious	. charit	able, scientif	ic. litera	arv. or edu	cationa		_			
		ses, or for the prevention of cruelty to				•		∏Yes	X No			
b		wer is "Yes" to 5a(1)-(5), did any of the						_	scribed			
		tions section 53.4945 or in a current no								5b		
		ions relying on a current notice regardi							▶□			
С	-	wer is "Yes" to question 5a(4), does t	_						· L			
•		t maintained expenditure responsibility							□No			
		ittach the statement required by Regul						res				
6a		undation, during the year, receive any					amilims	1				
- Oa	on a nerse	onal benefit contract?						΄ □Yes	X No			
h	•	undation, during the year, pay premiun								6b		×
b		o 6b, file Form 8870.	iio, uii e	cay or maire	ony, on	a persona	Dellell	Contract		30		
7a		e during the tax year, was the foundation	a narti	to a probibit	ad tay a	holtor trans	action?	□vas	∀ No			
	-	lid the foundation receive any proceed		•						7b		
8		ndation subject to the section 4960 ta								76	•	1
0		tion or excess parachute payment(s) de							□No			
Part		nformation About Officers, Direc									665	
· are		and Contractors	, .	11401000, 1	Janaa	tion man	ugeio,	· ···g····y ·	u.u	p.o.y	· · · · · ·	
1		ficers, directors, trustees, and found	lation r	nanagers ar	d their	compens	ation. S	See instru	uctions	; <u> </u>		
		(AA)		e, and average		mpensation		Contribution		(e) Expe	nse acc	count.
		(a) Name and address	hou	e, and average rs per week ed to position	(lf r	mpensation not paid, iter -0-)	emple	Contribution: byee benefit erred compe	plans	(e) Expe	nse acc allowan	
	TREY D		hou devot	rs per week ed to position	(lf r	not paid,	emple	yee benefit	plans			
	FREY D.	HEISER	hou devot	rs per week ed to position	(lf r	not paid, iter -0-)	emple	yee benefit	plans			ces
949 N	. CENTER	HEISER STREET, SUITE A STOCKTON CA 95202	hou devot	rs per week ed to position	(lf r	not paid,	emple	yee benefit	plans ensation			ces
949 N BARE	N. CENTER BARA HEI	HEISER STREET, SUITE A STOCKTON CA 95202 SER	hou devot	rs per week ed to position I DENT 0.00 ETARY	(lf r	not paid, iter -0-)	emple	yee benefit	plans ensation			0.
949 N BARE	N. CENTER BARA HEI	HEISER STREET, SUITE A STOCKTON CA 95202	hou devot	rs per week ed to position IDENT 0.00	(lf r	not paid, iter -0-)	emple	yee benefit	plans ensation			ces
949 N BARE	N. CENTER BARA HEI	HEISER STREET, SUITE A STOCKTON CA 95202 SER	hou devot	rs per week ed to position I DENT 0.00 ETARY	(lf r	not paid, iter -0-)	emple	yee benefit	plans ensation			0.
949 N BARE	N. CENTER BARA HEI	HEISER STREET, SUITE A STOCKTON CA 95202 SER	hou devot	rs per week ed to position I DENT 0.00 ETARY	(lf r	not paid, iter -0-)	emple	yee benefit	plans ensation			0.
949 N BARE	N. CENTER BARA HEI	HEISER STREET, SUITE A STOCKTON CA 95202 SER	hou devot	rs per week ed to position I DENT 0.00 ETARY	(lf r	not paid, iter -0-)	emple	yee benefit	plans ensation			0.
949 N BARE	N. CENTER BARA HEI W. WALN	HEISER STREET, SUITE A STOCKTON CA 95202 SER NUT STREET STOCKTON CA 95203	PRES:	rs per week ed to position I DENT 0.00 ETARY 0.00	(lf r	0 .	emple and def	oyee benefit erred compe	plans ensation 0.	other	allowan	0. 0.
949 N BARE	N. CENTER BARA HEI W. WALN	HEISER STREET, SUITE A STOCKTON CA 95202 SER	PRES:	rs per week ed to position I DENT 0.00 ETARY 0.00	(lf r	0 .	emple and def	oyee benefit erred compe	plans ensation 0.	other	allowan	0. 0.
949 N BARE	N. CENTER BARA HEI W. WALN Compens	HEISER STREET, SUITE A STOCKTON CA 95202 SER NUT STREET STOCKTON CA 95203	PRES:	rs per week ed to position IDENT 0.00 ETARY 0.00 er than thos	(if r	0 .	emple and def	see instr	plans on a disconnection of the control of the cont	other	one,	0.
949 N BARE 1155	Compens	HEISER STREET, SUITE A STOCKTON CA 95202 SER NUT STREET STOCKTON CA 95203	PRES. SECRI	er than those (b) Title, and a hours per v	se inclusiverage	0 .	emplo and def	oyee benefit erred compe	O. O. uctions	other	one,	0. 0. enter
949 N BARE 1155	Compens	HEISER STREET, SUITE A STOCKTON CA 95202 SER UUT STREET STOCKTON CA 95203 sation of five highest-paid employed	PRES. SECRI	rs per week ed to position I DENT 0.00 ETARY 0.00 er than thos	se inclusiverage	0.	emplo and def	see instri	O. O. uction:	other	one,	0. 0. enter
949 N BARE 1155	Compens "NONE."	HEISER STREET, SUITE A STOCKTON CA 95202 SER UUT STREET STOCKTON CA 95203 sation of five highest-paid employed	PRES. SECRI	er than those (b) Title, and a hours per v	se inclusiverage	0.	emplo and def	see instr	O. O. uction:	other	one,	0. 0. enter
949 N BARE 1155	Compens "NONE."	HEISER STREET, SUITE A STOCKTON CA 95202 SER UUT STREET STOCKTON CA 95203 sation of five highest-paid employed	PRES. SECRI	er than those (b) Title, and a hours per v	se inclusiverage	0.	emplo and def	see instr	O. O. uction:	other	one,	0. 0. enter
949 N BARE 1155	Compens "NONE."	HEISER STREET, SUITE A STOCKTON CA 95202 SER UUT STREET STOCKTON CA 95203 sation of five highest-paid employed	PRES. SECRI	er than those (b) Title, and a hours per v	se inclusiverage	0.	emplo and def	see instr	O. O. uction:	other	one,	0. 0. enter
949 N BARE 1155	Compens "NONE."	HEISER STREET, SUITE A STOCKTON CA 95202 SER UUT STREET STOCKTON CA 95203 sation of five highest-paid employed	PRES. SECRI	er than those (b) Title, and a hours per v	se inclusiverage	0.	emplo and def	see instr	O. O. uction:	other	one,	0. 0. enter
949 N BARE 1155	Compens "NONE."	HEISER STREET, SUITE A STOCKTON CA 95202 SER UUT STREET STOCKTON CA 95203 sation of five highest-paid employed	PRES. SECRI	er than those (b) Title, and a hours per v	se inclusiverage	0.	emplo and def	see instr	O. O. uction:	other	one,	0. 0. enter
949 N BARE 1155	Compens "NONE."	HEISER STREET, SUITE A STOCKTON CA 95202 SER UUT STREET STOCKTON CA 95203 sation of five highest-paid employed	PRES. SECRI	er than those (b) Title, and a hours per v	se inclusiverage	0.	emplo and def	see instr	O. O. uction:	other	one,	0. 0. enter
949 N BARE 1155	Compens "NONE."	HEISER STREET, SUITE A STOCKTON CA 95202 SER UUT STREET STOCKTON CA 95203 sation of five highest-paid employed	PRES. SECRI	er than those (b) Title, and a hours per v	se inclusiverage	0.	emplo and def	see instr	O. O. uction:	other	one,	0. 0. enter
949 N BARE 1155	Compens "NONE."	HEISER STREET, SUITE A STOCKTON CA 95202 SER UUT STREET STOCKTON CA 95203 sation of five highest-paid employed	PRES. SECRI	er than those (b) Title, and a hours per v	se inclusiverage	0.	emplo and def	see instr	O. O. uction:	other	one,	0. 0. enter
949 N BARE 1155	Compens "NONE."	HEISER STREET, SUITE A STOCKTON CA 95202 SER UUT STREET STOCKTON CA 95203 sation of five highest-paid employed	PRES. SECRI	er than those (b) Title, and a hours per v	se inclusiverage	0.	emplo and def	see instr	O. O. uction:	other	one,	0. 0. enter
949 M BARE 1155 2	Compens "NONE."	HEISER STREET, SUITE A STOCKTON CA 95202 SER UUT STREET STOCKTON CA 95203 sation of five highest-paid employed	PRES. SECRI	er than those (b) Title, and a hours per v	se inclusiverage	0.	emplo and def	see instr	O. O. uction:	other	one,	0. 0. enter

and Contractors (continued)	ion managers, nighiy Paid En	ipioyees,
3 Five highest-paid independent contractors for professional services. See	e instructions. If none, enter "NONI	E."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	<u> </u>	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant sta organizations and other beneficiaries served, conferences convened, research papers produced, etc.	atistical information such as the number of	Expenses
1		
•••••••••••••••••••••••••••••••••••••••		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instruction		
Describe the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2	Amount
1		
		1
2		
All the control of th		
All other program-related investments See instructions		
3		
Total Add lines 1 thus inh 0		-
Total. Add lines 1 through 3	<u> </u>	

Part	Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	gn foundation	ons,
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	
b	Average of monthly cash balances	1b	
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	
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	
3	Subtract line 2 from line 1d	3	0.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	0.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0.
6	Minimum investment return. Enter 5% of line 5	6	0.
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations, check here ► □ and do not complete this part.)	oundations	
1	Minimum investment return from Part X, line 6	1	0.
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.) 2b	1	
c	Add lines 2a and 2b	2c	37.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	0.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
•	line 1	7	0.
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1	
_	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	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b. See instructions	5	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		e foundation
	qualifies for the section 4940(e) reduction of tax in those years.	5cc. un	

Part	Undistributed income (see instruction	ons)			
		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7				0.
2	Undistributed income, if any, as of the end of 2019:				
а	Enter amount for 2018 only				
b	Total for prior years: 20, 20, 20				
3	Excess distributions carryover, if any, to 2019:				
а	From 2014 4,851.				
b	From 2015 3,794.				
C	From 2016				
d	From 2017 3,518.				
е	From 2018 19,156.				
f	Total of lines 3a through e	34,076.			
4	Qualifying distributions for 2019 from Part XII, line 4: ► \$				
а	Applied to 2018, but not more than line 2a .				
b	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2019 distributable amount				
е	Remaining amount distributed out of corpus	0.	· ·	1	
5	Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	34,076.			
b	Prior years' undistributed income. Subtract line 4b from line 2b	·	0.		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has				
	been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable amount—see instructions		0.	·	
е	Undistributed income for 2018. Subtract line				
	4a from line 2a. Taxable amount-see				
	instructions			0.	
f	Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				0
_					0.
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)				
8	Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).	4,851.			
9	Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	29,225.			
10	Analysis of line 9:	23,2201			
a	Excess from 2015				
b	Excess from 2016 2,757.				
С	Excess from 2017				
d	Excess from 2018 19, 156.]
е	Excess from 2019 0.				[

Form 9	, 90-PF (2019)			ı		Page 10
Part	XIV Private Operating Founda	tions (see instru	uctions and Part	VII-A, question 9	9)	N/A
1a	If the foundation has received a ruling	g or determination	letter that it is a	private operating		
	foundation, and the ruling is effective fo	r 2019, enter the d	late of the ruling .	•		
b	Check box to indicate whether the four	ndation is a private	e operating founda	ition described in s	ection 🗌 4942()(3) or 🗌 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2019	(b) 2018	(c) 2017	(d) ∙2016	(c) Iotai
	each year listed					
b	85% of line 2a				/	
С	Qualifying distributions from Part XII,					
	line 4, for each year listed					
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
_	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
_	alternative test relied upon:					
а	"Assets" alternative test—enter:					
u	(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 .		}			
_	"Support" alternative test—enter:					
·						
	(1) Total support other than gross investment income interest,					
	dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties) (2) Support from general public					-
	and 5 of more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)		ļ.,,			
	(3) Largest amount of support from an exempt organization					
				-		
Dow	(4) Gross investment income XV Supplementary Information	n (Complete ti	 his now only if t	ha farmdatian b		l cocoto et
Part	any time during the year-			me loungation r	iad \$5,000 or n	iore in assets at
1	Information Regarding Foundation		113.)			
' a	List any managers of the foundation		uted more than 20	% of the total cont	ributions received	hy the foundation
а	before the close of any tax year (but of					
	before the close of any tax year (but o	any ir they have o	ontributed more ti	1a11 \$5,000). (OCC 5	(a)(2).)	
b	List any managers of the foundation	who own 1094 o	r more of the sta	ok of a corporatio	n (or an aqually l	arge portion of the
	ownership of a partnership or other er					arge portion or the
	ownership of a paraticionip of outer of	inty) or willow allo	, our autor rius u	. o / o o / g. oator ii /		
	Information Regarding Contribution	Cront Cift Los	on Cabalarabin	to Programos		
2	Check here ► 🗵 if the foundation		· ·		organizations on	d dage not accept
	unsolicited requests for funds. If the f					
	complete items 2a, b, c, and d. See in		girts, grants, etc.,	, to individuals of c	ngamzations und	er other conditions,
			drace of the pares	n to whom applied	ations should be	addrosood:
а	The name, address, and telephone nu	imber or email ad	aress of the perso	on to whom applica	ations should be a	adaressea:
	T1 6 1 121 2 12 4 2 12 1	11 1 44 1	.1.1.2.2		Latin at a late	
b	The form in which applications should	i de submitted an	a intormation and	materials they sho	ouia include:	
С	Any submission deadlines:					
	Any restrictions or limitations on aw	ards, such as h	ov geographical a	reas, charitable fi	elds, kinds of in	stitutions, or other
-	factors:		, <u>3</u> 3		,	,

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Ver

3 Grants and Contributions Paid During	the Year or Approv	ed for Fu	ture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year				
TEMPLE ISRAEL			TO ASSIST	
5105 N. ELDORADO ST.			CHARITABLE	
STOCKTON CA 95204		NONE	ACTIVITY	650.
UNIVERSITY OF THE PACIFIC			TO ASSIST	
3601 PACIFIC AVE.			CHARITABLE	
STOCKTON CA 95211		NONE	ACTIVITY	315.
DELTA SIERRA GRAMMAR SCHOOL			TO ASSIST	
2255 WAGER HEIGHTS RD			CHARITABLE	
STOCKTON CA 95209		NONE	ACTIVITY	12.
STOCKTON CHORALE			TO ASSIST	
PO BOX 7711			CHARITABLE	
STOCKTON CA 95267		NONE	ACTIVITY	105.
ACT SPRAY/NEUTER CLINIC			TO ASSIST	
327 E ALPINE AVE			CHARITABLE	
STOCKTON CA 95204		NONE	ACTIVITY	502.
PAWS			TO ASSIST	
5200 ROSELVELT WAY NE			CHARITABLE	
SEATTLE WA 98105		NONE	ACTIVITY	500.
PRIMARY YEARS ACADEMY			TO ASSIST	
1540 LINCOLN ST			CHARITABLE	
STOCKTON CA 95204		NONE	ACTIVITY	30.
SAN JOAQUIN DELTA COLLEGE		110112	TO ASSIST	
5151 PACIFIC AVE			CHARITABLE	
STOCKTON CA 95207		NONE	ACTIVITY	35.
FRIENDS OF THE CHAMBER MUSIC		NOWE	TO ASSIST] 33.
PO BOX 4874			CHARITABLE	
STOCKTON CA 95204		NONE	ACTIVITY	65.
See Statement		NONE	ACTIVITI	05.
See Statement				
				883.
				883.
Total			▶ 3a	3,097.
b Approved for future payment				
				1
Total	<u> </u>		▶ 3b	-
TOTAL			<u> </u>	'I

Pai	rt XV	I-A Analysis of Income-Producing Ac	ctivities				
Ente	r gro	ss amounts unless otherwise indicated.	T	isiness income	Excluded by sect	on 512, 513, or 514	(e)
4	Proc	stam convec revenue.	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
'	a a	gram service revenue:					
	b -						
	c -						
	ď					<u> </u>	· · · · · · · · · · · · · · · · · · ·
	е -						
	f						
	a F	Fees and contracts from government agencies					
2	-	bership dues and assessments					
3		est on savings and temporary cash investments					
4		dends and interest from securities			18	1,794.	
5	Net	rental income or (loss) from real estate:					
	a [Debt-financed property					
	b 1	Not debt-financed property		•			
6	Net	rental income or (loss) from personal property					
7		er investment income					
8		or (loss) from sales of assets other than inventory		· · · · · · · · · · · · · · · · · · ·	18	114.	
9		income or (loss) from special events					
10		ss profit or (loss) from sales of inventory					
11		er revenue: a					
	b _						
	°						
	d _						<u></u>
40	e Cubi	total. Add columns (b), (d), and (e)				1 000	
12					L	1,908. 13	1,908.
	Tate						
13		al. Add line 12, columns (b), (d), and (e)					1, 500.
13 See	work	sheet in line 13 instructions to verify calculation	s.)				1,,500.
13 See Par		sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		
13 See Par Line	work t XV	sheet in line 13 instructions to verify calculation	s.) .ccomplishm	ent of Exemp	t Purposes		
13 See Par Line	work t XV e No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm income is report poses (other that	ent of Exemp orted in column n by providing fun	t Purposes (e) of Part XVI ds for such purp	-A contributed ir oses). (See instruc	
13 See Par Line	work t XV e No.	Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur INVESTMENT INCOME WITH THE PUR	s.) ccomplishm ncome is repoposes (other than POSE TO GI	ent of Exemported in column to by providing fun	t Purposes (e) of Part XVI ds for such purp	-A contributed in oses). (See instructions.	
13 See Par Line	work t XV e No.	Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm ncome is repoposes (other than POSE TO GI	ent of Exemported in column to by providing fun	t Purposes (e) of Part XVI ds for such purp	-A contributed in oses). (See instructions.	
13 See Par Line	work t XV e No.	Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur INVESTMENT INCOME WITH THE PUR	s.) ccomplishm ncome is repoposes (other than POSE TO GI	ent of Exemported in column to by providing fun	t Purposes (e) of Part XVI ds for such purp	-A contributed in oses). (See instructions.	
13 See Par Line	work t XV e No.	Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur INVESTMENT INCOME WITH THE PUR	s.) ccomplishm ncome is repoposes (other than POSE TO GI	ent of Exemported in column to by providing fun	t Purposes (e) of Part XVI ds for such purp	-A contributed in oses). (See instructions.	
13 See Par Line	work t XV e No.	Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur INVESTMENT INCOME WITH THE PUR	s.) ccomplishm ncome is repoposes (other than POSE TO GI	ent of Exemported in column to by providing fun	t Purposes (e) of Part XVI ds for such purp	-A contributed in oses). (See instructions.	
13 See Par Line	work t XV e No.	Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur INVESTMENT INCOME WITH THE PUR	s.) ccomplishm ncome is repoposes (other than POSE TO GI	ent of Exemported in column to by providing fun	t Purposes (e) of Part XVI ds for such purp	-A contributed in oses). (See instructions.	
13 See Par Line	work t XV e No.	Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur INVESTMENT INCOME WITH THE PUR	s.) ccomplishm ncome is repoposes (other than POSE TO GI	ent of Exemported in column to by providing fun	t Purposes (e) of Part XVI ds for such purp	-A contributed in oses). (See instructions.	
13 See Par Line	work t XV e No.	Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur INVESTMENT INCOME WITH THE PUR	s.) ccomplishm ncome is repoposes (other than POSE TO GI	ent of Exemported in column to by providing fun	t Purposes (e) of Part XVI ds for such purp	-A contributed in oses). (See instructions.	
13 See Par Line	work t XV e No.	Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur INVESTMENT INCOME WITH THE PUR	s.) ccomplishm ncome is repoposes (other than POSE TO GI	ent of Exemported in column to by providing fun	t Purposes (e) of Part XVI ds for such purp	-A contributed in oses). (See instructions.	
13 See Par Line	work t XV e No.	Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur INVESTMENT INCOME WITH THE PUR	s.) ccomplishm ncome is repoposes (other than POSE TO GI	ent of Exemported in column to by providing fun	t Purposes (e) of Part XVI ds for such purp	-A contributed in oses). (See instructions.	
13 See Par Line	work t XV e No.	Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur INVESTMENT INCOME WITH THE PUR	s.) ccomplishm ncome is repoposes (other than POSE TO GI	ent of Exemported in column to by providing fun	t Purposes (e) of Part XVI ds for such purp	-A contributed in oses). (See instructions.	
13 See Par Line	work t XV e No.	Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur INVESTMENT INCOME WITH THE PUR	s.) ccomplishm ncome is repoposes (other than POSE TO GI	ent of Exemported in column to by providing fun	t Purposes (e) of Part XVI ds for such purp	-A contributed in oses). (See instructions.	
13 See Par Line	work t XV e No.	Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur INVESTMENT INCOME WITH THE PUR	s.) ccomplishm ncome is repoposes (other than POSE TO GI	ent of Exemported in column to by providing fun	t Purposes (e) of Part XVI ds for such purp	-A contributed in oses). (See instructions.	
13 See Par Line	work t XV e No.	Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur INVESTMENT INCOME WITH THE PUR	s.) ccomplishm ncome is repoposes (other than POSE TO GI	ent of Exemported in column to by providing fun	t Purposes (e) of Part XVI ds for such purp	-A contributed in oses). (See instructions.	
13 See Par Line	work t XV e No.	Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur INVESTMENT INCOME WITH THE PUR	s.) ccomplishm ncome is repoposes (other than POSE TO GI	ent of Exemported in column to by providing fun	t Purposes (e) of Part XVI ds for such purp	-A contributed in oses). (See instructions.	
13 See Par Line	work t XV e No.	Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur INVESTMENT INCOME WITH THE PUR	s.) ccomplishm ncome is repoposes (other than POSE TO GI	ent of Exemported in column to by providing fun	t Purposes (e) of Part XVI ds for such purp	-A contributed in oses). (See instructions.	
13 See Par Line	work t XV e No.	Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur INVESTMENT INCOME WITH THE PUR	s.) ccomplishm ncome is repoposes (other than POSE TO GI	ent of Exemported in column to by providing fun	t Purposes (e) of Part XVI ds for such purp	-A contributed in oses). (See instructions.	
13 See Par Line	work t XV e No.	Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur INVESTMENT INCOME WITH THE PUR	s.) ccomplishm ncome is repoposes (other than POSE TO GI	ent of Exemported in column to by providing fun	t Purposes (e) of Part XVI ds for such purp	-A contributed in oses). (See instructions.	
13 See Par Line	work t XV e No.	Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur INVESTMENT INCOME WITH THE PUR	s.) ccomplishm ncome is repoposes (other than POSE TO GI	ent of Exemported in column to by providing fun	t Purposes (e) of Part XVI ds for such purp	-A contributed in oses). (See instructions.	
13 See Par Line	work t XV e No.	Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur INVESTMENT INCOME WITH THE PUR	s.) ccomplishm ncome is repoposes (other than POSE TO GI	ent of Exemported in column to by providing fun	t Purposes (e) of Part XVI ds for such purp	-A contributed in oses). (See instructions.	
13 See Par Line	work t XV e No.	Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur INVESTMENT INCOME WITH THE PUR	s.) ccomplishm ncome is repoposes (other than POSE TO GI	ent of Exemported in column to by providing fun	t Purposes (e) of Part XVI ds for such purp	-A contributed in oses). (See instructions.	

Part	XVII	Informatio Organizati	n Regarding Tra ons	nsfers to and	Transac	ions and I	Relationshi	ps With I	Noncha	ritable		emp
1	in se	he organization of the org	directly or indirectly other than section								Yes	No
а	_	nizations? sfers from the rep	porting foundation t	to a noncharitat	ole exempt	organization	n of:					
					•	_				1a(1)		×
		ther assets .								1a(2)		<u>×</u>
b		r transactions:								41-(4)		
			a noncharitable ex ets from a nonchari							1b(1) 1b(2)		×
			, equipment, or oth							1b(2)		×
			rrangements							1b(4)		×
			rantees							1b(5)		×
			ervices or members							1b(6)		×
С		-	quipment, mailing I							1c		×
	value value	of the goods, o	of the above is "Ye ther assets, or serv on or sharing arrang	rices given by the gement, show in	ne reportin n column (c	g foundation	. If the found of the goods,	lation rece other ass	eived less ets, or se	than rvices	fair m recer	arke ved.
(a) Line	e no ((b) Amount involved	(c) Name of none	charitable exempt or	ganization	(d) Desc	ription of transfe	rs, transaction	ons, and sha	aring arr	angeme	ents
	+								-			
	_											
				· · ·								

				-								
			-									
							·					
	1- 11-			certi a di tal	1.1.1.1			•				
2a			ectly or indirectly a 501(c) (other than se				iore tax-exer	npt organ	lizations	□ v a	s 🗵	No
b			following schedule		01 111 0000						:5 🔼	IVO
		(a) Name of organi	<u></u>	•	e of organizat	ion		(c) Description	on of relatio	nship	_	
	•											
	Ünde	r penalties of periury. I	declare that I have examin	ed this return, includi	ng accompany	ng schedules an	d statements, and	to the best o	t mv knowled	dge and l	pelief, it	ıs true
Sign Here	сопе		aration of preparer (other th		d on all informa		parer has any kno		May the II	RS discu	ss this hown b	return elow?
		ature of officer of trus	stee	Date		itle			See instru	ctions	Tes[
 Paid		Print/Type preparer	's name	Preparer's signe	ture	, 00	Date		ck 💹 If 📗	PTIN		
Prepa	arer	Ellıs D Mi		منكللغ ا		MIXE	09/14/2		employed			1
Use (Firm's name ►	O. B. KLEINE	ELD AND CO	•			Firm's EIN	► 68-01	7262	0	

Phone no. (209) 948-6400 949 N. CENTER ST., Firm's address ▶ Form **990-PF** (2019) CA 95202-1327 STOCKTON BAA

HEISER FOUNDATION 94-6064977

· Form 990-PF: Return of Private Foundation

Part XV, Line 3a: Grants and Contributions Paid During the Year

Continuation Statement

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				
NATIONAL WILDLIFE FEDERATION		NONE	TO ASSIST	69.
1 STATIONERY PLACE			CHARITABLE ACTIVITY	
REXBURG, ID 83441			ACTIVITI	
UPLIFT ALL FOUNDATION		NONE	TO ASSIST	50.
545 W. SONORA ST			CHARITABLE ACTIVITY	
STOCKTON, CA 95203			ACTIVITI	
PETA		NONE	TO ASSIST	50.
501 FRONT ST			CHARITABLE ACTIVITY	
NORFOLK, VA 23510			ACTIVITI	
ZEON LUTHERN CHURCH		NONE	TO ASSIST	100.
808 PORTER AVE			CHARITABLE ACTIVITY	
STOCKTON, CA 95207			ACTIVITY	
STOCKTON SYMPHONY		NONE	TO ASSIST	114.
9629 QUILL LAKES DRIVE			CHARITABLE	
STOCKTON, CA 95207	,		ACTIVITY	
RICKY & SUZANNE BARNES FOUNDATION		NONE	TO ASSIST	500.
7077 E MARILYN ROAD, STE 140			CHARITABLE	
SCOTTDALE, AZ 85254			ACTIVITY	
				000

883.

Additional information from your Form 990-PF: Return of Private Foundation

Form 990-PF: Return of Private Foundation

Taxes

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
CALIFORNIA FRANCHISE TAX	10.			
FEDERAL EXCISE TAX	34.			
SECRETARY OF STATE	0.			
ATTONEY GENERAL	25.			
Total	69.			

Name	•	Employer Identification No					
HEISER FOUNDATION		94-6064977					
Accet Information							
	Asset Information:						
Description of Property CAPITAL GAINS							
Business Code Exclusion Code <u>18</u>							
Date Acquired How Acquired							
Date Sold Name of Buyer Check Box, if Buyer is a Business							
	Cost or other basis (do not reduce by depreciat						
Sales Expense	Valuation Method						
Total Gain (Loss)	114. Accumulated Depreciation	· · · ·					
Description of Property							
Business Code Exclusi	on Code						
Date Acquired	How Acquired						
Date Sold	Name of Buyer .						
Check Box, if Buyer is a Business .							
Sales Price	Cost or other basis (do not reduce by depreciat	ion)					
Sales Expense	Valuation Method						
	Accumulated Depreciation						
Description of Property							
Business Code Exclusi	on Code						
Date Acquired .	How Acquired						
Date Sold	Name of Buyer						
Check Box, if Buyer is a Business .							
Sales Price Cost or other basis (do not reduce by depreciation)							
Sales Expense	Valuation Method						
	Accumulated Depreciation						
Description of Property							
Business Code Exclusi	on Code						
Date Acquired .	How Acquired .						
Date Soid	Name of Buyer						
Check Box, if Buyer is a Business.	· · · · · · · · · · · · · · · · · · ·	>					
	Cost or other basis (do not reduce by depreciat						
	Valuation Method						
Description of Property	Accumulated Depreciation						
Business Code Exclusi							
Dusiness Code Lxciusi	on code						
Date Acquired .	How Acquired .						
Date Sold Check Box, if Buyer is a Business .	Name of Buyer .						
•	_	uon)					
Sales Expanse	Cost or other basis (do not reduce by depreciat						
Total Gain (Loss)	Valuation Method						
Total Gaill (Loss)	Accumulated Depreciation	· · · · · · · · · · · · · · · · · · ·					
Totals:							
Total Gain (Loss) of all assets114							
Gross Sales Price of all assets							
Unrelated Business Income							
		=					
Excluded by section 512, 513, 514 114 . Exclusion Code . 18 Related/Exempt Function Income							
Total Carlot and total moonie .	· · · · · · · · · · · · · · · · · · ·						
QuickZoom here to Form 990-PF. Pag	je 1						
-	je 12						
		·					

Legal and Professional Fees

Name	Employer Identification No
HEISER FOUNDATION	94-6064977

Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
otal to Form 990	-PF, Part I, Line 16a				

Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
O.B. KLEINFELD	ACCOUNTING FEE	1,890.			
Total to Form 990-	PF, Part I, Line 16b	1,890.			

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable, Purposes
CHARLES SCHWAB	BROKEAGE FEE	290.			
Total to Form 990-	PF, Part I, Line 16c	290.			