

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

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

▶ **Do not enter social security numbers on this form as it may be made public.**  
 ▶ **Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.**

OMB No 1545-0052  
**2018**  
**Open to Public Inspection**

**For calendar year 2018, or tax year beginning 01-01-2018 , and ending 12-31-2018**

Name of foundation ATKINSON FOUNDATION C/O PACIFIC FOUNDATION SERVICES		<b>A Employer identification number</b> 94-6075613	
Number and street (or P O box number if mail is not delivered to street address) 1660 BUSH STREET NO 300		<b>B Telephone number (see instructions)</b> (415) 561-6540	
City or town, state or province, country, and ZIP or foreign postal code SAN FRANCISCO, CA 94019		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>	
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
<b>I</b> Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ <u>21,569,020</u>		<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
<b>J</b> Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)			

<b>Part I Analysis of Revenue and Expenses</b> <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc., received (attach schedule)				
	<b>2</b> Check <input checked="" type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B				
	<b>3</b> Interest on savings and temporary cash investments	2,000	2,000		
	<b>4</b> Dividends and interest from securities	434,578	434,578		
	<b>5a</b> Gross rents				
	<b>b</b> Net rental income or (loss)				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10	1,494,319			
	<b>b</b> Gross sales price for all assets on line 6a	4,574,672			
	<b>7</b> Capital gain net income (from Part IV, line 2)		1,494,319		
	<b>8</b> Net short-term capital gain				
	<b>9</b> Income modifications				
	<b>10a</b> Gross sales less returns and allowances				
<b>b</b> Less Cost of goods sold					
<b>c</b> Gross profit or (loss) (attach schedule)					
<b>11</b> Other income (attach schedule)	620	620			
<b>12 Total.</b> Add lines 1 through 11	1,931,517	1,931,517			
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc	0	0		0
	<b>14</b> Other employee salaries and wages				
	<b>15</b> Pension plans, employee benefits				
	<b>16a</b> Legal fees (attach schedule)				
	<b>b</b> Accounting fees (attach schedule)	30,700	0		12,700
	<b>c</b> Other professional fees (attach schedule)	165,076	0		165,076
	<b>17</b> Interest				
	<b>18</b> Taxes (attach schedule) (see instructions)				
	<b>19</b> Depreciation (attach schedule) and depletion				
	<b>20</b> Occupancy				
	<b>21</b> Travel, conferences, and meetings				
	<b>22</b> Printing and publications				
	<b>23</b> Other expenses (attach schedule)	15,161	0		26,768
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23	210,937	0		204,544
	<b>25</b> Contributions, gifts, grants paid	1,296,300			1,255,500
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	1,507,237	0		1,460,044	
<b>27</b> Subtract line 26 from line 12					
<b>a Excess of revenue over expenses and disbursements</b>	424,280				
<b>b Net investment income</b> (if negative, enter -0-)		1,931,517			
<b>c Adjusted net income</b> (if negative, enter -0-)					

**Part II Balance Sheets** Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	96,931	2,246	2,246
	<b>2</b> Savings and temporary cash investments . . . . .	1,667,462	1,538,923	1,538,923
	<b>3</b> Accounts receivable ▶ <u>5,561</u>			
	Less allowance for doubtful accounts ▶ _____	263	5,561	5,561
	<b>4</b> Pledges receivable ▶ _____			
	Less allowance for doubtful accounts ▶ _____			
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____			
	Less allowance for doubtful accounts ▶ _____			
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .	46	732	732
	<b>10a</b> Investments—U S and state government obligations (attach schedule)			
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .	11,890,713	12,392,718	14,921,500
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .			
	<b>11</b> Investments—land, buildings, and equipment basis ▶ _____			
Less accumulated depreciation (attach schedule) ▶ _____				
<b>12</b> Investments—mortgage loans . . . . .				
<b>13</b> Investments—other (attach schedule) . . . . .	4,873,269	5,036,911	5,099,373	
<b>14</b> Land, buildings, and equipment basis ▶ _____				
Less accumulated depreciation (attach schedule) ▶ _____				
<b>15</b> Other assets (describe ▶ _____)	0	685	685	
<b>16 Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	18,528,684	18,977,776	21,569,020	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	22,834	39,915	
	<b>18</b> Grants payable . . . . .	240,000	280,800	
	<b>19</b> Deferred revenue . . . . .			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule). . . . .			
	<b>22</b> Other liabilities (describe ▶ _____)	152,597	49,912	
	<b>23 Total liabilities</b> (add lines 17 through 22) . . . . .	415,431	370,627	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	<b>24</b> Unrestricted . . . . .			
	<b>25</b> Temporarily restricted . . . . .			
	<b>26</b> Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>			
	<b>27</b> Capital stock, trust principal, or current funds . . . . .	0	0	
	<b>28</b> Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
<b>29</b> Retained earnings, accumulated income, endowment, or other funds	18,113,253	18,607,149		
<b>30 Total net assets or fund balances</b> (see instructions) . . . . .	18,113,253	18,607,149		
<b>31 Total liabilities and net assets/fund balances</b> (see instructions) .	18,528,684	18,977,776		

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b> Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	<b>1</b>	18,113,253
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	424,280
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	69,616
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	18,607,149
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	0
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	<b>6</b>	18,607,149

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., 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)
<b>1 a</b> CHARLES SCHWAB TRANSACTIONS	P		
<b>b</b> US BANK TRANSACTIONS	P		
<b>c</b>			
<b>d</b>			
<b>e</b>			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> 2,417,536		1,967,583	449,953
<b>b</b> 2,157,136		1,112,770	1,044,366
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
<b>a</b>			449,953
<b>b</b>			1,044,366
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	2	1,494,319
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No  
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017	1,140,816	23,043,436	0.049507
2016	990,745	20,735,316	0.047781
2015	913,829	20,393,745	0.044809
2014	726,451	20,142,118	0.036066
2013	622,407	17,905,863	0.034760

<b>2</b> Total of line 1, column (d)	2	0.212923
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	0.042585
<b>4</b> Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	23,487,750
<b>5</b> Multiply line 4 by line 3	5	1,000,226
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	6	19,315
<b>7</b> Add lines 5 and 6	7	1,019,541
<b>8</b> Enter qualifying distributions from Part XII, line 4	8	1,460,044

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

Table with 11 rows for excise tax calculation. Includes sub-tables for 6a-6d (Credits/Payments) and 9 (Overpayment). Total amount owed is 0, and amount overpaid is 19,685.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Columns include question number, 'Yes', and 'No'. Questions cover political activities, unrelated business income, and asset requirements.

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-14 regarding controlled entities, distributions, public inspection requirements, and books in care.

Located at 1660 BUSH STREET SUITE 300 SAN FRANCISCO CA ZIP+4 94019

15 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.

Table with 3 columns: Question, Yes, No. Row 16 regarding interest in foreign countries.

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

Main table with 3 columns: Question, Yes, No. Rows 1a-4b regarding Form 4720 exceptions and requirements.

**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required (continued)

**5a** During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  Yes  No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?  Yes  No

(3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.  Yes  No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  Yes  No

**b** If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions. **5b**

Organizations relying on a current notice regarding disaster assistance check here.

**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  Yes  No  
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?  Yes  No

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **6b**  Yes  No  
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?  Yes  No

**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? **7b**  Yes  No

**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 during the year?  Yes  No

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

**1** List all officers, directors, trustees, foundation managers and their compensation. See instructions

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				

**2** Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000.

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**

<b>3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".</b>		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
PACIFIC FOUNDATION SERVICES 1660 BUSH STREET 300 SAN FRANCISCO, CA 94019	MANAGEMENT FEES	165,076
THE GOLUB GROUP 1850 GATEWAY DR 100 SAN MATEO, CA 94404	INVESTMENT FEES	84,672
<b>Total number of others receiving over \$50,000 for professional services.</b>		<b>0</b>

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3	<b>0</b>

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	22,143,280
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	1,702,151
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	23,845,431
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	23,845,431
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	357,681
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	23,487,750
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	1,174,388

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	1,174,388
<b>2a</b>	Tax on investment income for 2018 from Part VI, line 5.	<b>2a</b>	19,315
<b>b</b>	Income tax for 2018 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	19,315
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	1,155,073
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	0
<b>5</b>	Add lines 3 and 4.	<b>5</b>	1,155,073
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	1,155,073

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	1,460,044
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	1,460,044
<b>5</b>	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.	<b>5</b>	19,315
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	1,440,729

**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 4940(e) reduction of tax in those years.



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
<b>1</b> Distributable amount for 2018 from Part XI, line 7				1,155,073
<b>2</b> Undistributed income, if any, as of the end of 2018				
<b>a</b> Enter amount for 2017 only. . . . .			0	
<b>b</b> Total for prior years 20___, 20___, 20___		0		
<b>3</b> Excess distributions carryover, if any, to 2018				
<b>a</b> From 2013. . . . .				
<b>b</b> From 2014. . . . .				
<b>c</b> From 2015. . . . .				
<b>d</b> From 2016. . . . .				
<b>e</b> From 2017. . . . .				8,791
<b>f</b> Total of lines 3a through e. . . . .	8,791			
<b>4</b> Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ <u>1,460,044</u>				
<b>a</b> Applied to 2017, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2018 distributable amount. . . . .				1,155,073
<b>e</b> Remaining amount distributed out of corpus	304,971			
<b>5</b> Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a) )				0
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	313,762			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> 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		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019 . . . . .				0
<b>7</b> 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). . . . .	0			
<b>8</b> Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions). . . . .	0			
<b>9</b> Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a . . . . .	313,762			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2014. . . . .				
<b>b</b> Excess from 2015. . . . .				
<b>c</b> Excess from 2016. . . . .				
<b>d</b> Excess from 2017. . . . .				8,791
<b>e</b> Excess from 2018. . . . .				304,971

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. . . . . ▶

**b** Check box to indicate whether the organization is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

**2a** Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .

	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)**

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

**a** The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

STEFANI WILLIS  
1660 BUSH STREET SUITE 300  
SAN FRANCISCO, CA 94019  
(415) 561-6540  
SWILLIS@PFS-LLC NET

**b** The form in which applications should be submitted and information and materials they should include

SEE WWW ATKINSONFDN ORG

**c** Any submission deadlines

SEE WWW ATKINSONFDN ORG

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

NOT FUNDED BY FOUNDATION, GRANTS TO IND, GRANTS TO DOCTORAL STUDY OR RESEARCH, GRANTS TO INFLUENCE LEGISLATION, GRANTS TO NAT'L OR STATEWIDE PROGRAMS, DONATIONS TO OR SPONSORSHIP OF FUNDRAISING OR ANNUAL CAMPAIGNS, OR GRANTS FOR FILMS, VIDEOS, PUBLICATIONS AND CONFERENCES

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . .</b>				<b>▶ 3a</b>
<b>b</b> <i>Approved for future payment</i> See Additional Data Table				
<b>Total . . . . .</b>				<b>▶ 3b</b>

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

Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		<b>(e)</b> Related or exempt function income (See instructions )
	<b>(a)</b> Business code	<b>(b)</b> Amount	<b>(c)</b> Exclusion code	<b>(d)</b> Amount	
<b>1</b> Program service revenue					
<b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> _____					
<b>g</b> Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments. . . . .					
<b>3</b> Interest on savings and temporary cash investments . . . . .			14	2,000	
<b>4</b> Dividends and interest from securities. . . . .			14	434,578	
<b>5</b> Net rental income or (loss) from real estate					
<b>a</b> Debt-financed property. . . . .					
<b>b</b> Not debt-financed property. . . . .					
<b>6</b> Net rental income or (loss) from personal property					
<b>7</b> Other investment income. . . . .			14	620	
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .			18	1,494,319	
<b>9</b> Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory					
<b>11</b> Other revenue <b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>12</b> Subtotal. Add columns (b), (d), and (e). . . . .		0		1,931,517	0
<b>13 Total.</b> Add line 12, columns (b), (d), and (e). . . . .					<b>13</b> 1,931,517

(See worksheet in line 13 instructions to verify calculations )

**Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions )

**Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
a Transfers from the reporting foundation to a noncharitable exempt organization of:
(1) Cash.
(2) Other assets.
b Other transactions:
(1) Sales of assets to a noncharitable exempt organization.
(2) Purchases of assets from a noncharitable exempt organization.
(3) Rental of facilities, equipment, or other assets.
(4) Reimbursement arrangements.
(5) Loans or loan guarantees.
(6) Performance of services or membership or fundraising solicitations.
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

Table with 4 columns: (a) Line No, (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements.

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? [ ] Yes [x] No

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.
Sign Here: Signature of officer or trustee, Date: 2019-10-23, Title:
May the IRS discuss this return with the preparer shown below (see instr)? [x] Yes [ ] No

Paid Preparer Use Only section containing: Print/Type preparer's name (MARIANNE KRISTOFFERSON CPA), Preparer's Signature, Date (2019-10-23), Check if self-employed (checked), PTIN (P00024506), Firm's name (VOCKER KRISTOFFERSON AND CO CPAS), Firm's EIN (94-3119928), Firm's address (1700 S EL CAMINO REAL506 SAN MATEO, CA 94402), Phone no (650) 574-5000.

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
OLIVIA O ARANDA	DIRECTOR (FORMER)	0	0	0
1660 BUSH STREET SUITE 300 SAN FRANCISCO, CA 94019	4 00			
JEAN S ATKINSON	SECRETARY	0	0	0
1660 BUSH STREET SUITE 300 SAN FRANCISCO, CA 94019	4 00			
SUSAN R ATKINSON	DIRECTOR (FORMER)	0	0	0
1660 BUSH STREET SUITE 300 SAN FRANCISCO, CA 94019	4 00			
WILLIAM W CRANDALL JR	ASST TREASURER	0	0	0
1660 BUSH STREET SUITE 300 SAN FRANCISCO, CA 94019	4 00			
ROBERT H GRIFFIN	DIRECTOR	0	0	0
1660 BUSH STREET SUITE 300 SAN FRANCISCO, CA 94019	4 00			
LINDA L LANIER	PRESIDENT	0	0	0
1660 BUSH STREET SUITE 300 SAN FRANCISCO, CA 94019	4 00			
STEPHEN A WAY	TREASURER	0	0	0
1660 BUSH STREET SUITE 300 SAN FRANCISCO, CA 94019	4 00			
ELIZABETH S WOODWARD	DIRECTOR	0	0	0
1660 BUSH STREET SUITE 300 SAN FRANCISCO, CA 94019	4 00			
JOHN VOLK	DIRECTOR	0	0	0
1660 BUSH STREET SUITE 300 SAN FRANCISCO, CA 94019	4 00			
NANCY SPENCER	DIRECTOR	0	0	0
1660 BUSH STREET SUITE 300 SAN FRANCISCO, CA 94019	4 00			
MARGARET TAYLOR	DIRECTOR	0	0	0
1660 BUSH STREET SUITE 300 SAN FRANCISCO, CA 94019	4 00			
JAMES AVEDISIAN	ASST VP/TREASURER (FORMER)	0	0	0
1660 BUSH STREET SUITE 300 SAN FRANCISCO, CA 94019	4 00			
DAVID RICHANBACH	DIRECTOR	0	0	0
1660 BUSH STREET SUITE 300 SAN FRANCISCO, CA 94019	4 00			

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

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ABLE WORKS 1836 BAY ROAD SUITE B EAST PALO ALTO, CA 94303		NON PROFIT	LIVEABLE	7,500
AIM HIGH FOR HIGH SCHOOL POBOX 410715 SAN FRANCISCO, CA 94141		NON PROFIT	SUMMER LEARNING PROGRAM	10,000
THE ARC OF SAN FRANCISCO 1500 HOWARD STREET SAN FRANCISCO, CA 94103		NON PROFIT	GENERAL SUPPORT	7,500
<b>Total . . . . .</b> ▶ <b>3a</b>				1,255,500

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

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
THE ART OF YOGA PROJECT 555 BRYANT STREET 232 PALO ALTO, CA 94301		NON PROFIT	GENERAL SUPPORT	10,000
ASPIRANET (EXPERIENCE CORPS BAY AREA) 400 OYSTER POINT BLVD SUITE 501 SOUTH SAN FRANCISCO, CA 94080		NON PROFIT	GENERAL SUPPORT	7,500
ASSISTANCE LEAGUE OF SAN MATEO COUNTY 528 N SAN MATEO DR SAN MATEO, CA 94401		NON PROFIT	OPERATION SCHOOL BELL	5,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,255,500



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Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
AYUDANDO LATINOS A SONAR POBOX 961 EL GRANADA, CA 94018		NON PROFIT	COMMUNITY MENTAL HEALTH SERVICES	10,000
BIG BROTHERS BIG SISTERS OF THE BAY AREA 65 BATTERY STREET SAN FRANCISCO, CA 94111		NON PROFIT	GENERAL SUPPORT FOR COMMUNITY BASED MENTORING, WITH A FOCUS ON SAN MATEO COUNTY YOUTH	7,500
BOYS & GIRLS CLUB OF THE COASTSIDE POBOX 545 600 CHURCH STREET HALF MOON BAY, CA 94019		NON PROFIT	BUILDING THE DREAM	50,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,255,500

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

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BOYS & GIRLS CLUB OF THE COASTSIDE POBOX 545 600 CHURCH STREET HALF MOON BAY, CA 94019		NON PROFIT	COUNT ME IN	15,000
BOYS & GIRLS CLUB OF THE PENINSULA 401 PIERCE ROAD MENLO PARK, CA 94025		NON PROFIT	HIGH SCHOOL SUCCESS PROGRAM	10,000
BUSINESSES UNITED IN INVESTING LENDING AND DEVELOPMENT POBOX 3316 REDWOOD CITY, CA 94064		NON PROFIT	GENERAL SUPPORT FOR BUILD BAY AREA	10,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,255,500

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Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CALIFORNIA CLUBHOUSE INC 210 INDUSTRIAL ROAD SUITE 102 SAN CARLOS, CA 94070		NON PROFIT	TO ENHANCE THE "WELLNESS WORKS"PROGRAM FOCUSING ON FOUR PILLARS OF WELLNESS NUTRITION, PHYSICAL ACTIVITY WELLNESS EDUCATION AND SOCIO-EMOTIONAL WELLNESS	10,000
CASA OF SAN MATEO 330 TWIN DOLPHIN DRIVE SUITE 139 REDWOOD CITY, CA 94065		NON PROFIT	GENERAL PROGRAM SUPPORT	10,000
CATHOLIC CHARITIES CYO 990 EDDY STREET SAN FRANCISCO, CA 94109		NON PROFIT	CATHOLIC CHARITIES ADULT DAY SERVICES SAN MATEO COUNTY (ADS SMC)	7,500
<b>Total . . . . .</b>				<b>1,255,500</b>

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

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CHRISTIAN ACTION LIFE LINE 139 PRIMROSE ROAD BURLINGAME, CA 94010		NON PROFIT	GENERAL SUPPORT FUNDING FOR THE COMMUNITY PANTRY PROGRAM	10,000
CITY OF REDWOOD CITY 2600 MIDDLEFIELD ROAD REDWOOD CITY, CA 94063		NON PROFIT	FAIR OAKS COMMUNITY CENTER INFORMATION AND REFERAAAL PROGRAM	5,000
CLEO EULAU CENTER FOR CHILDREN AND ADOLESCETS (ACKNOWLEDGE ALLIANCE) 2483 OLD MIDDLEFIELD WAY SUITE 201 MOUNTAIN VIEW, CA 94043		NON PROFIT	COLLABORATIVE COUNSELING AND TRANSITION PROGRAM	7,500
<b>Total . . . . .</b> ▶ <b>3a</b>				1,255,500

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Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
COASTSIDE CHILD DEVELOPMENT CENTER POBOX 84 HALF MOON BAY, CA 94019		NON PROFIT	SUPPORT FOR SUBSIDIZED CHILD CARE AND EDUCATION AS WELL AS EARLY INTERVENTION AND SERVICES FOR AT-RISK CHILDREN	10,000
COASTSIDE CHILD'S PROGRAMS 494 MIRAMONTES AVENUE HALF MOON BAY, CA 94019		NON PROFIT	GENERAL SUPPORT PRESCHOOL EXPANSION THROUGH ADDITIONAL STAFF	10,000
COMMUNITY GATEPATH 350 TWIN DOLPHIN DRIVE SUITE 123 REDWOOD CITY, CA 94065		NON PROFIT	INDIVIDUAL PLACEMENT EMPLOYMENT FOR PERSONS WITH DISABILITIES	10,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,255,500

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

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
COMMUNITY INITIATIVE SHPBA 1000 BROADWAY SUITE 480 OAKLAND, CA 94607		NON PROFIT	GENERAL SUPPORT FOR HARMONY PROJECT BAY AREA	5,000
COMMUNITY LEGAL SERVICES OF EAST PALO ALTO 1861 BAY ROAD EAST PALO ALTO, CA 94303		NON PROFIT	GENERAL SUPPORT	10,000
COMMUNITY SCHOOL OF MUSIC AND ARTS 230 SAN ANTONIO CIRCLE MOUNTAIN VIEW, CA 94040		NON PROFIT	ART4SCHOOLS & MUSIC4SCHOOLS	7,500
<b>Total . . . . . ▶ 3a</b>				1,255,500

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Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CONSEVATION EARTH (WILDMIND SCIENCE LEARNING) POBOX 3098 1794 HIGGINS CANYON ROAD HALF MOON BAY, CA 94019				
CURIODYSSEY 1651 COYOTE POINT DRIVE SAN MATEO, CA 94401				
THE DALY CITY PUBLIC LIBRARY ASSOCIATES POBOX 3283 DALY CITY, CA 94015				
<b>Total . . . . .</b>	<b>▶ 3a</b>			1,255,500

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

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
DRAWBRIDGE AN ARTS PROGRAM FOR HOMELESS CHILDREN POBOX 2698 SAN RAFAEL, CA 94912		NON PROFIT	DRAWBRIDGE WEEKLY ART PROGRAM FOR HOMELESS CHILDEN AT HAVEN FAMILY HOUSE IN MENLO PARK	7,500
EASTSIDE COLLEGE PREPARATORY SCHOOL 1041 MYRTLE STREET EAST PALO ALTO, CA 94303		NON PROFIT	2018 SUMMER SESSION	10,000
EDUCATION OUTSIDE 135 VAN NESS AVENUE SUITE 408 SAN FRANCISCO, CA 94102		NON PROFIT	BRINGING THE NEW SCHOOL DAY TO NEW SAN MATEO COMMUNITIES	10,000
<b>Total . . . . . ▶ 3a</b>				1,255,500



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

Recipient	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	
Name and address (home or business)					
<b>a</b> <i>Paid during the year</i>					
EL CENTRO DE LIBERTADTHE FREEDOM CENTER 500 LLERTON REDWOOD CITY, CA 94063					15,000
ENVIRONMENTAL VOLUNTEERS 2500 EMBARCADERO ROAD PALO ALTO, CA 94303					7,500
FAITH IN ACTION BAY AREA 1336 ARROYO AVENUE SAN CARLOS, CA 94070					15,000
<b>Total . . . . . ▶ 3a</b>				1,255,500	

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

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FOUNDATION FOR A COLLEGE EDUCATION 2160 EUCLID AVE EAST PALO ALTO, CA 94303		NON PROFIT	MITIGATING CRITICAL JUNCTURE POINTS FOR STUDENTS OF COLOR	10,000
FOUNDATION FOR STUDENTS RISING ABOVE POBOX 192492 SAN FRANCISCO, CA 94119		NON PROFIT	COLLEGE AND WORKFORCE SEVICES FOR SAN MATEO COUNTY STUDENTS	10,000
FREE AT LAST1796 BAY ROAD EAST PALO ALTO, CA 94303		NON PROFIT	FREE AT LAST GENERAL OPERATING SUPPORT	5,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,255,500

<b>Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment</b>				
Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FRESH LIFELINES FOR YOUTH INC 568 VALLEY WAY MILPITAS, CA 95035		NON PROFIT	FLY LAW + LEADERSHIP PROGRAM FOR SMC YOUTH	7,500
FRIENDS FOR YOUTH 1741 BROADWAY REDWOOD CITY, CA 94063		NON PROFIT	MENTORING & COMMUNITY CONNECTIONS	7,500
FRIENDS FOF HUDDART AND WUNDRLICH PARKS POBOX 620767 WOODSIDE, CA 94062		NON PROFIT	EXPANDING ACCESS TO NATURE AT HUDDART AND WUNDERLICH PARKS TO SERVE 1,850 PEOPLE INCLUDING 600 LOW-INCOME YOUTH AND 150 PEOPLE WITH HEALTH AND MOBILITY CHALLENGES	5,000
<b>Total . . . . .</b>			<b>▶ 3a</b>	1,255,500

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Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
GIRL SCOUTS OF NORTHERN CALIFORNIA 1650 HARBOR BAY PARKWAY SUITE 100 ALAMEDA, CA 94502		NON PROFIT	DAUGHTERS OF FARM WORKERS	10,000
HABITAT FOR HUMANITY 500 WASHINGTON ST SUITE 250 SAN FRANCISCO, CA 94941		NON PROFIT	GENERAL SUPPORT	10,000
THE HEAL PROJECT POBOX 3051 HALF MOON BAY, CA 94019		NON PROFIT	GENERAL SUPPORT	5,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,255,500

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Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HEALTH CONNECTED 480 JAMES AVENUE REDWOOD CITY, CA 94062			NON PROFIT REVENSWOOD AND REDWOOD CITY SEXUAL HEALTH EDUCATION PROJECT	10,000
HILLCREST CHAPLAINCY & MINISTRIES 1544 CAROL AVENUE SAN MATEO, CA 94402			NON PROFIT PROGRAM AREA COMMUNITY, REHABILITAION, CHILREN AND YOUTH, CHURCHES, ECUMENICAL (CHRISTIAN), SOCIAL SERVICE OUTREACH, RELIGIOUS EDUCATIONPROGRAM AREA COMMUNITY, REHABILITATION, CHILDREN AND YOUTH, CHURCHES, ECUMENICAL (CHRISTIAN), SOCIAL SERVICE OUTREACH, RELIGIOUS EDUCATION	5,000
HILLER AVIATION INSTITUTE 601 SKYWAY ROAD SAN CARLOS, CA 94070			NON PROFIT ACADEMIC SCHOOL FIELD TRIPS FOR LOW INCOME SCHOOLS	5,000
<b>Total . . . . . ▶ 3a</b>				1,255,500

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

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HOME AND HOPE 1720 EL CAMINO REAL 7 BURLINGAME, CA 94010		NON PROFIT	EMERGENCY ROTATION SHELTER SERVICE	10,000
HOMEWORK CENTRALPOBOX 6687 SAN MATEO, CA 94403		NON PROFIT	AFTER SCHOOL TUTORING PROGRAM TO BRIDGE THE EDUCATIONAL DIVIDE	15,000
HUMAN INVESTMENT PROJECT 800 SOUTH CLAREMONT STREET SUITE 210 SAN MATEO, CA 94402		NON PROFIT	GENERAL SUPPORT	7,500
<b>Total . . . . .</b> ▶ <b>3a</b>				1,255,500

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

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
INSTITUTO LABORAL DE LA RAZA INC 949 NAPLES STREET SAN FRANCISCO, CA 94103		NON PROFIT	IN SUPPORT OF SAN MATEO COUNTY'S WORKING POOR	10,000
INTERSECTION FOR THE ARTS (THE BEAT WITHIN) POBOX 34310 1448 MARKET STREET SAN FRANCISCO, CA 94102		NON PROFIT	THE BEAT WITHIN WRITING AND CONVERSATION WORKSHOP IN SAN MATEO COUNTY JUVENILE HALL	10,000
JASPER RIDGE FARM 2995 WOODSIDE ROAD 620924 WOODSIDE, CA 94062		NON PROFIT	WE ARE REQUESTING SUPPORT FOR OUR HORSEBUDDIES PROGRAM	10,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,255,500

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

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
JEFFERSON UNION HIGH SCHOOL DISTRICT (DALY CITY YOUTH HEALTH CENTER) 699 SERRAMONTE BOULEVARD SUITE 100 DALY CITY, CA 94015		NON PROFIT	CAPITAL & GROWTH CAMPAIGN FOR DALY CITY HEALTH YOUTH CENTER	100,000
JEWISH COMMUNITY RELATIONS COUNCIL (JEWISH COALITION FOR LITERACY) 131 STEUART STREET SUITE 205 SAN FRANCISCO, CA 94105		NON PROFIT	TUTORING, PARENT DEUCATION AND BOOK COLLECTIONS	10,000
JOBTRAIN INC1200 OBRIEN DRIVE MENLO PARK, CA 94022		NON PROFIT	CAREER TRAINING AND PLACEMENT PROGRAMS (GENERAL SUPPORT)	7,500
<b>Total . . . . .</b> ▶ <b>3a</b>				1,255,500



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

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
KARA457 KINGSLEY AVENUE PALO ALTO, CA 94301		NON PROFIT	GENERAL SUPPORT FOR GRIEF SUPPORT AND CIRSIS INTERVENTION AND EDUCATION FOR VULNERABLE POPULATIONSGENERAL SUPPORT FOR GRIEF SUPPORT AND CRISIS INTERVENTION AND EDUCATION FOR VULNERBLE POPULATIONSGENERAL SUPPORT FOR GRIEF SUPPORT AND CRISIS INTERCENTION AND EDUCATION FOR VULNERABLE POPULATIONS	10,000
LATINO COMMISSION ON DRUG AND ALCOHOL ABUSE SERVICES OF SAN MATEO COUNTY 1001 SNEATH LANE STE 307 SAN BRUNO, CA 94066		NON PROFIT	ENTRE FAMILIA OUTPATIENT SERVIES	7,500
LEAP ARTS IN EDUCATION 2601 MISSION STREET SUITE 603 SAN FRANCISCO, CA 94105		NON PROFIT	ARTIST-IN-RESIDENCE PROGRAM, SAN MATEO COUNTY	7,500
<b>Total . . . . . ▶ 3a</b>				1,255,500

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

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
LOAVES & FISHES FAMILY KITCHEN 1534 BERGER DRIVE SAN JOSE, CA 95112		NON PROFIT	HOT NUTRITIOUS MEAL PROGRAM	10,000
MENTAL HEALTH ASSOCIATION OF SAN MATEO COUNTY 2686 SPRING STREET REDWOOD CITY, CA 94063		NON PROFIT	RESIDENT ASSISTANT MENTOR (RAM) PROGRAM	15,000
MID-PENINSULA BOYS & GIRLS CLUB INC 200 NORTH QUEBEC STREET SAN MATEO, CA 94401		NON PROFIT	GENERAL SUPPORT	10,000
<b>Total . . . . . ▶ 3a</b>				1,255,500

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

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MUSIC FOR MINORS 1100 INDUSTRIAL RD STE 10 SAN CARLOS, CA 94070		NON PROFIT	MUSIC FOR MINORS (MFM) IN-SCHOOL MUSIC EDUCATION PROGRAM	5,000
MY NEW RED SHOES 330 TWIN DOLPHIN DRIVE SUITE 135 REDWOOD CITY, CA 94065		NON PROFIT	CLOTHING FOR CONFIDENCE	5,000
NATIONAL ALLIANCE ON MENTAL ILLNESS-SAN MATEO COUNTY 1650 BOREL PLACE 130 SAN MATEO, CA 94403		NON PROFIT	GENERAL OPERATING SUPPORT	15,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,255,500

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

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
NATIONAL CENTER FOR EQUINE FACILITATED THERAPY 880 RUNNYMEDE RD WOODSIDE, CA 94062				
NATIONAL HEPATITIS EDUCATION AND WELLNESS CENTER 14407 BIG BASIN WAY SUITE F SARATOGA, CA 94070				
NORTH VALLEY COMMUNITY FOUNDATION 240 MAIN ST SUITE 200 CHICO, CA 95928				
<b>Total . . . . .</b>	<b>▶ 3a</b>			1,255,500

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

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
OMBUDSMAN SERVICES OF SAN MATEO COUNTY INC 711 NEVADA ST REDWOOD CITY, CA 94061		NON PROFIT	GENERAL SUPPORT	10,000
ONE LIFE COUNSELING CENTER 961 LAUREL STREET SUITE 203 SAN CARLOS, CA 94070		NON PROFIT	BUILDING RESILIENCY FOR HIGH NEEDS AND ECONOMICALLY DISADVANTAGED STUDENTS IN SPECIAL DAY CLASSES IN REDWOOD CITY	7,500
PACIFICA SCHOOL VOLUNTEERS 375 REINA DEL MAR PACIFICA, CA 94044		NON PROFIT	FOR PACIFICA SCHOOL VOLUNTEERS LITERACT CHAMPIONS PROGRAM	10,000
<b>Total . . . . .</b>				1,255,500

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

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PALO ALTO ART CENTER FOUNDATION 1313 NEWELL ROAD PALO ALTO, CA 94303		NON PROFIT	CULTURAL KALEIDOSCOPE	5,000
PENINSULA CONFLICT RESOLUTION CENTER 1660 SOUTH AMPHLETT BLVD SUITE 219 SAN MATEO, CA 94402		NON PROFIT	GENERAL OPERATING SUPPORT	7,500
PIE RANCHPOBOX 363 PESCADERO, CA 94060		NON PROFIT	HEALTH & VOCATIONAL EDUCATION FOR SAN MATEO COUNTY YOUTH	10,000
<b>Total . . . . . ▶ 3a</b>				1,255,500

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

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PLANNED PARENTHOOD MAR MONTE INC 1691 THE ALAMEDA SAN JOSE, CA 95126		NON PROFIT	PROMOTING HEALTH AND ACCESS TO CARE FOR UNDERSERVED COMMUNITIES IN SAN MATEO COUNTY	10,000
PUENTE DE LA COSTA SURPOBOX 554 PESCADERO, CA 94060		NON PROFIT	GENERAL SUPPORT	25,000
RAVENSWOOD EDUCATION FOUNDATION POBOX 396 MENLO PARK, CA 94026		NON PROFIT	RAVENSWOOD MENTAL HEALTH INITIATIVE	5,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,255,500

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

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
READING PARTNERS 600B VALLEY WAY MILPITAS, CA 95035				
REBUILDING TOGETHER PENINSULA 841 KAYNYNE ST REDWOOD CITY, CA 94063				
REDWOOD CITY POLICE ACTIVITIES LEAGUE 3399 BAY ROAD REDWOOD CITY, CA 94063				
<b>Total . . . . .</b>	<b>▶ 3a</b>			1,255,500



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

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
REGENTS OF THE UNIVERSITY OF CALIFORNIA 2801 SECOND STREET DAVIS, CA 95618		NON PROFIT	ELKUS RANCH SCHOLARSHIP PROGRAM SUPPORT	7,000
RENAISSANCE ENTREPRENEURSHIP CENTER 275 FIFTH ST SAN FRANCISCO, CA 94103		NON PROFIT	GENERAL SUPPORT	5,000
RESOURCE AREA FOR TEACHING 1355 RIDDER PARK DRIVE SAN JOSE, CA 95131		NON PROFIT	SAN MATEO COUNTY EDUCATOR OYTREACH	5,000
<b>Total . . . . . ▶ 3a</b>				1,255,500

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Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
RISE-REACHING AND INSPIRING SUCCESS THROUGH EDUCATION CORP POBOX 1983 LOS ALTOS, CA 94023		NON PROFIT	GENERAL OPERATING COSTS ASSOCIATED WITH THE RISE AFTER SCHOOL PROGRAM HRNRTSL OPERATING COSTS ASSOCIATED WITH THE RISE AFTER SCHOOL PROGRAM	5,000
ROTACARE BAY AREA INC 514 VALLEY WAY MILPITAS, CA 95035		NON PROFIT	GENERAL SUPPORT FOR HEALTH SAFETY NET SERVICES IN SAN MATEO COUNTY	10,000
SAMARITAN HOUSE 4031 PACIFIC BLVD SAN MATEO, CA 94403		NON PROFIT	SAMARITAN HOUSE CLIENT SERVICES AND FOOD PROGRAM	25,000
<b>Total . . . . .</b>				1,255,500

▶ **3a**

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

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SAN MATEO COUNTY COMMUNITY COLLEGE FOUNDATION 3401 CSM DRIVE SAN MATEO, CA 94402			NON PROFIT THE ATKINSON FOUNDATION SCHOLARSHIP FOR CANADA COLLEGE, COLLEGE OF SAN MATEO AND SKYLINE COLLEGE	21,000
SAN MATEO COUNTY HISTORICAL ASSOCIATION 2200 BROADWAY REDWOOD CITY, CA 94063			NON PROFIT FURNISHING PLAN TO PROVIDE HISTORIC INTERPRETATION FOR SANCHEZ ADOBE AT THE SANCHEZ ADOBE HISTORIC PARK IN PACIFICA	25,000
SAN MATEO COUNTY PARKS AND RECREATION FOUNDATION 1701 COYOTE POINT ROAD SAN MATEO, CA 94401			NON PROFIT IMPROVING ACCESS FOR VISITORS AT SANCHEZ ADOBE HISTORIC SITE, PACIFICA, CA	10,000
<b>Total . . . . .</b>				<b>1,255,500</b>

▶ **3a**

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

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SAN MATEO COUNTY SHERIFFS ACTIVITIES LEAGUE 3151 EDISON WAY REDWOOD CITY, CA 94063		NON PROFIT	SAL LITERACY PROGRAM AT MOONRIDGE, MENTORING PROGRAM WITH PILARCITOS AND CHUNHA, AND EMPOWERING YOUNG WOMEN AT HALF MOON BAY SAL LITERACY PROGRAM AT MOONRIDGE, MENTORING PROGRAM WITH PILARCITOS AND CUNHA, AND EMPOWERING YOUNG WOMEN AT HALF MOON BAY	10,000
SAN MATEO POLICE ACTIVITIES LEAGUE 200 FRANKLIN PARKWAY SAN MATEO, CA 94403		NON PROFIT	SAN MATEO POLICE ACTIVITIES LEAGUE PROGRAMS	7,500
SAN MATEO PUBLIC LIBRARY FOUNDATION 55 WEST THIRD AVENUE SAN MATEO, CA 94402		NON PROFIT	LITERACY OUTREACH EXPANSION CONTINUED SUPPORT	10,000
<b>Total . . . . . ▶ 3a</b>				1,255,500

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

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SCIENCE FROM SCIENTISTS INC 533 AIRPORT BLVD SUITE 135 BURLINGAME, CA 94010		NON PROFIT	IN-SCHOOL MODULE-BASED STEM ENRICHMENT PROGRAM	7,500
SECOND HARVEST FOOD BANK OF SANTA CLARA AND SAN MATEO COUNTIES 750 CURTNER AVE SAN JOSE, CA 95125		NON PROFIT	BUILDING A HEALTHIER COMMUNITY (GENERAL SUPPORT FOR SAN MATEO COUNTY SERVICES)	10,000
SERVICE LEAGUE OF SAN MATEO COUNTY 727 MIDDLEFIELD ROAD REDWOOD CITY, CA 94063		NON PROFIT	EDUCATION & THERAPY PROGRAM SUPPORT FOR HOPE HOUSE FOR WOMEN & INFANTS	10,000
<b>Total . . . . .</b>	<b>▶ 3a</b>			1,255,500

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Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SILICON VALLEY EDUCATION FOUNDATION 1400 PARKMOOR AVENUE SUITE 200 SAN JOSE, CA 95126		NON PROFIT	MATH ACCELERATION PROGRAM (MAP)	5,000
SILICON VALLEY URBAN DEBATE LEAGUE SOBRATO CENTER FOR NONPROFITS MILPITAS, CA 95035		NON PROFIT	URBAN DEBATE REVOLUTION SAN MATEO COUNTY	7,500
SMALL SCHOOLS FOR EQUITY 15ONONDAGA AVE 12217 SAN FRANCISCO, CA 94112		NON PROFIT	UNIDOS FOR FREEDOM-IMMIGRANT YOUTH LEADERSHIP PROJECT	5,000
<b>Total . . . . . ▶ 3a</b>				1,255,500

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
THE SOCIETY OF ST VINCENT DE PAUL PARTICULAR COUNCIL OF SAN MATEO COUNTY 50 NORTH B STREET SAN MATEO, CA 94401			NON PROFIT GENERAL SUPPORT	7,500
SONRISAS DENTAL HEALTH 430 N EL CAMINO REAL SAN MATEO, CA 94401			NON PROFIT GERIATRIC DENTISTRY IN THE COASTSIDE AND MID-PENINSULA AREA OF SAN MATEO COUNTY UNCOMPENSATED ORAL HEALTH CARE FOR SENIORS IN SAN MATEO COUNTY	7,500
SOUTH COUNTY COMMUNITY HEALTH CENTER (RAVENSOOD FAMILY HEALTH CETER) 1885 BAY ROAD EAST PALO ALTO, CA 94303			NON PROFIT GENERAL OPERATING SUPPORT FOR RAVENWOOD FAMILY HEALTH VENTER	15,000
<b>Total . . . . . ▶ 3a</b>				1,255,500

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Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SOUTH SAN FRANCISCO FRIENDS OF THE LIBRARY (PROJECT READ - NORTH SAN MATEO) 840 WEST ORANGE AVENUE SOUTH SAN FRANCISCO, CA 94080		NON PROFIT	FINANCIAL WELL BEING FOR ADULT LITERACY STUENT AND LOW-INCOME IMMIGRANTS THROUGH PROJECT READ-NORTH SAN MATEO COUNTY	10,000
STARVISTA610 ELM STREET SUITE 212 SAN CARLOS, CA 94070		NON PROFIT	GENERAL SUPPORT	10,000
SUCCESS CENTER SAN FRANCISCO 146 S SPRUS AVE SOUTH SAN FRANCISCO, CA 94080		NON PROFIT	YOUTH CONNECTION CENTER	7,500
<b>Total . . . . .</b> ▶ <b>3a</b>				1,255,500



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Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
TEEN SUCCESS INC508 VALLEY WAY MILPITAS, CA 95035		NON PROFIT	EAST PALO ALTO /REDWOOD CITY TEEN SUCCESS PROGRAM	7,500
TWBD INC(FREEDOM HOUSE) POBOX 2065 BURLINGAME, CA 94011		NON PROFIT	MONARCH SHELTER FOR HUMAN-TRAFFICKING SURVIVORS	5,000
UNITED METHODIST CHURCH OF BURLINGAME 1443 HOWARD AVE BURLINGAME, CA 94010		NON PROFIT	GENERAL SUPPORT	5,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,255,500

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Recipient	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	
Name and address (home or business)					
<b>a</b> <i>Paid during the year</i>					
UPWARD SCHOLARS3481 JANICE WAY PALO ALTO, CA 94303					10,000
VIDA VERDE NATURE EDUCATION 3540 LA HONDA ROAD SAN GREGORIO, CA 94074					20,000
VIDA VERDE NATURE EDUCATION 3540 LA HONDA ROAD SAN GREGORIO, CA 94074					7,500
<b>Total . . . . .</b>				<b>1,255,500</b>	

▶ **3a**

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Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
VISTA CENTER FOR THE BLIND AND VISUALLY IMPARED 2500 EL CAMINO REAL SUITE 100 PALO ALTO, CA 94306			NON PROFIT VISION LOSS REHABILITATION PROGRAM FOR SENIORS	5,000
YMCA OF SAN FRANCISCO 50 CALIFORNIA STREET SUITE 650 SAN FRANCISCO, CA 94111			NON PROFIT GENERAL SUPPORT	7,500
YMCA OF SILICON VALLEY LEWIS AND JOAN PLATT EAST PALO ALTO FAMILY YMCA SANTA CLARA, CA 95051			NON PROFIT LEWIS AND JOAN PLATT EAST PALO ALTO FAMILY YMCA'S YOUTH AND GOVERNMENT PROGRAM	10,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,255,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
YOUTH COMMUNITY SERVICE 705 ALESTER AVE ROOM 4 PALO ALTO, CA 94303		NON PROFIT	GENERAL SUPPORT	10,000
<b>Total . . . . . ▶ 3a</b>				1,255,500

**TY 2018 Accounting Fees Schedule****Name:** ATKINSON FOUNDATION

C/O PACIFIC FOUNDATION SERVICES

**EIN:** 94-6075613

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ACCOUNTING FEES	30,700	0		12,700

**TY 2018 Investments Corporate Stock Schedule**

**Name:** ATKINSON FOUNDATION  
C/O PACIFIC FOUNDATION SERVICES  
**EIN:** 94-6075613

**Investments Corporation Stock Schedule**

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
MARKETABLE SECURITIES	12,392,718	14,921,500

**TY 2018 Investments - Other Schedule**

**Name:** ATKINSON FOUNDATION  
C/O PACIFIC FOUNDATION SERVICES

**EIN:** 94-6075613

**Investments Other Schedule 2**

<b>Category/ Item</b>	<b>Listed at Cost or FMV</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
MUTUAL FUNDS	FMV	3,242,469	3,333,873
FIXED INCOME	FMV	1,794,442	1,765,500

**TY 2018 Other Assets Schedule****Name:** ATKINSON FOUNDATION

C/O PACIFIC FOUNDATION SERVICES

**EIN:** 94-6075613**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
PREPAID EXCISE TAX	0	685	685



**TY 2018 Other Expenses Schedule**

**Name:** ATKINSON FOUNDATION  
C/O PACIFIC FOUNDATION SERVICES

**EIN:** 94-6075613

**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MEMBERSHIPS	1,500	0		1,500
INSURANCE	1,302	0		1,988
MISCELLANEOUS	113	0		113
MEETINGS	4,979	0		4,979
FILING FEES	230	0		0
BANK FEES	849	0		0
EHC RETIREMENT BONUS	0	0		12,000
LEGAL FEES	6,188	0		6,188

**TY 2018 Other Income Schedule****Name:** ATKINSON FOUNDATION

C/O PACIFIC FOUNDATION SERVICES

**EIN:** 94-6075613**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
MISCELLANEOUS SECURITIES INCOME	620	620	620

**TY 2018 Other Increases Schedule**

**Name:** ATKINSON FOUNDATION  
C/O PACIFIC FOUNDATION SERVICES  
**EIN:** 94-6075613

<b>Description</b>	<b>Amount</b>
DEFERRED EXCISE TAX BENEFIT	69,616

**TY 2018 Other Liabilities Schedule**

**Name:** ATKINSON FOUNDATION  
C/O PACIFIC FOUNDATION SERVICES  
**EIN:** 94-6075613

<b>Description</b>	<b>Beginning of Year - Book Value</b>	<b>End of Year - Book Value</b>
DEFERRED EXCISE TAX PAYABLE	114,843	25,912
DEFERRED COMPENSATION PAYABLE	36,000	24,000
ACCRUED EXCISE TAX	1,754	0

**TY 2018 Other Professional Fees Schedule**

**Name:** ATKINSON FOUNDATION  
C/O PACIFIC FOUNDATION SERVICES

**EIN:** 94-6075613

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
PFS MANAGEMENT FEES	165,076	0		165,076