

MAIL TO:
Registry of Charitable Trusts
P.O. Box 903447
Sacramento, CA 94203-4470
Telephone: (916) 445-2021

WEB SITE ADDRESS:

<http://ag.ca.gov/charities/>

ANNUAL
REGISTRATION RENEWAL FEE REPORT
TO ATTORNEY GENERAL OF CALIFORNIA

Sections 12586 and 12587, California Government Code
11 Cal. Code Regs. sections 301-307, 311 and 312

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties as defined in Government Code section 12586.1. IRS extensions will be honored.

State Charity Registration Number: CT 0221127

SUNLIGHT GIVING

Name of Organization

855 EL CAMINO REAL, BLDG 4, SUITE 250

Address (Number and Street)

PALO ALTO, CA 94301

City or Town, State and ZIP Code

Check if:

☐ Change of address

☐ Amended report

Corporate or Organization No. 3709022

Federal Employer I.D. No. 47-1820379

ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311 and 312)

Make Check Payable to Attorney General's Registry of Charitable Trusts

Gross Annual Revenue	Fee	Gross Annual Revenue	Fee	Gross Annual Revenue	Fee
Less than \$25,000	0	Between \$100,001 and \$250,000	\$50	Between \$1,000,001 and \$10 million	\$150
Between \$25,000 and \$100,000	\$25	Between \$250,001 and \$1 million	\$75	Between \$10,000,001 and \$50 million	\$225
				Greater than \$50 million	\$300

PART A - ACTIVITIES

For your most recent full accounting period (beginning 01/01/2015 ending 12/31/2015) list:
Gross annual revenue \$ 389,244,662. Total assets \$ 373,812,898.

PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT

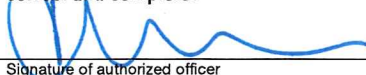
Note: If you answer "yes" to any of the questions below, you must attach a separate sheet providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required.

	Yes	No
1. During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof either directly or with an entity in which any such officer, director or trustee had any financial interest?		X
2. During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?		X
3. During this reporting period, did non-program expenditures exceed 50% of gross revenues?		X
4. During this reporting period, were any organization funds used to pay any penalty, fine or judgment? If you filed a Form 4720 with the Internal Revenue Service, attach a copy.		X
5. During this reporting period, were the services of a commercial fundraiser or fundraising counsel for charitable purposes used? If "yes," provide an attachment listing the name, address, and telephone number of the service provider.		X
6. During this reporting period, did the organization receive any governmental funding? If so, provide an attachment listing the name of the agency, mailing address, contact person, and telephone number.		X
7. During this reporting period, did the organization hold a raffle for charitable purposes? If "yes," provide an attachment indicating the number of raffles and the date(s) they occurred.		X
8. Does the organization conduct a vehicle donation program? If "yes," provide an attachment indicating whether the program is operated by the charity or whether the organization contracts with a commercial fundraiser for charitable purposes.		X
9. Did your organization have prepared an audited financial statement in accordance with generally accepted accounting principles for this reporting period?	X	

Organization's area code and telephone number (415) 561-6540

Organization's e-mail address HELLO@SUNLIGHTGIVING.ORG

I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, it is true, correct and complete.

 **TEGAN ACTON**
Signature of authorized officer Printed Name

PRESIDENT
Title

11/4/16
Date

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Enter filer's identifying number, see instructions

Type or print	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
File by the due date for filing your return. See instructions.	SUNLIGHT GIVING FOUNDATION	47-1820379
	Number, street, and room or suite no. If a P.O. box, see instructions.	Social security number (SSN)
	855 EL CAMINO REAL, BLDG 4, SUITE 250	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	PALO ALTO, CA 94301	

Enter the Return code for the return that this application is for (file a separate application for each return) 0 4

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

PACIFIC FOUNDATION SERVICES - 855 EL CAMINO REAL BLDG 4,

- The books are in the care of ☒ SUITE 250 - PALO ALTO, CA 94301

Telephone No. ☒ (415) 561-6540

Fax No. ☐

- If the organization does not have an office or place of business in the United States, check this box ☐

- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐ . If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until NOVEMBER 15, 2016.

5 For calendar year 2015, or other tax year beginning

6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return

☐ Change in accounting period

7 State in detail why you need the extension

TAXPAYER RESPECTFULLY REQUESTS ADDITIONAL TIME TO GATHER INFORMATION.
THIS IS NECESSARY TO COMPLETE AN ACCURATE TAX RETURN.

8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	3,905,000.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	3,905,000.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ☒ Frank Rimmerman Title ☒ CPA

Date ☒ 8/12/16

Form 8868 (Rev. 1-2014)

Frank, Rimmerman & Co. LLP 94-1341042
1801 Page Mill Road
Palo Alto, CA 94304

Paul Albre

Form **8868**
(Rev. January 2014)

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury
Internal Revenue Service

► File a separate application for each return.

► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on **e-file for Charities & Nonprofits**.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete ☐

Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Enter filer's identifying number

Type or print	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
	SUNLIGHT GIVING FOUNDATION	47-1820379
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 855 EL CAMINO REAL, BLDG 4, SUITE 250	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. PALO ALTO, CA 94301	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

PACIFIC FOUNDATION SERVICES - 855 EL CAMINO REAL BLDG 4,

- The books are in the care of ► SUITE 250 - PALO ALTO, CA 94301

Telephone No. ► (415) 561-6540

Fax No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2016**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 - ☒ calendar year **2015** or
 - ☐ tax year beginning _____, and ending _____

- If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period **Frank, Rimerman & Co. LLP 94-1341042**

3a	If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	1801 Page Mill Road Palo Alto, CA 94304	3a	\$	3,905,000.
b	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.		3b	\$	3,885,000.
c	Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.		3c	\$	20,000.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

EXTENDED TO NOVEMBER 15, 2016
Return of Private Foundation

OMB No. 1545-0052

2015

Open to Public Inspection

Form 990-PF

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For calendar year 2015 or tax year beginning , and ending

Name of foundation SUNLIGHT GIVING		A Employer identification number 47-1820379
Number and street (or P.O. box number if mail is not delivered to street address) 855 EL CAMINO REAL, BLDG 4, SUITE 250	Room/suite	B Telephone number (415) 561-6540
City or town, state or province, country, and ZIP or foreign postal code PALO ALTO, CA 94301		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H 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		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 373,812,898.	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received	387,346,977.		N/A	
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	823,523.	823,523.		STATEMENT 2
	4 Dividends and interest from securities	1,820,320.	1,820,320.		STATEMENT 3
	5a Gross rents				
	b Net rental income or (loss)	-746,158.			STATEMENT 1
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a	390,106,450.			
	7 Capital gain net income (from Part IV, line 2)		386,600,372.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less: Cost of goods sold				
	c Gross profit or (loss)				
	11 Other income				
	12 Total. Add lines 1 through 11	389,244,662.	389,244,215.		
	13 Compensation of officers, directors, trustees, etc.	0.	0.		0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees STMT 4	56,453.	0.		63,090.
	b Accounting fees STMT 5	20,000.	12,000.		6,000.
	c Other professional fees STMT 6	820,845.	398,025.		375,840.
	17 Interest				
	18 Taxes STMT 7	3,890,204.	0.		0.
	19 Depreciation and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses STMT 8	9,458.	330.		2,568.
	24 Total operating and administrative expenses. Add lines 13 through 23	4,796,960.	410,355.		447,498.
	25 Contributions, gifts, grants paid	6,416,600.			6,416,600.
	26 Total expenses and disbursements. Add lines 24 and 25	11,213,560.	410,355.		6,864,098.
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	378,031,102.			
	b Net investment income (if negative, enter -0-)		388,833,860.		
	c Adjusted net income (if negative, enter -0-)			N/A	

Part II Balance Sheets		Beginning of year (a) Book Value	End of year	
			(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing			
	2 Savings and temporary cash investments	167,606.	131,459,245.	131,459,245.
	3 Accounts receivable ▶ 967,999.		967,999.	967,999.
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use	39,150.	332.	332.
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
Liabilities	11 Investments - land, buildings, and equipment: basis ▶			
	Less: accumulated depreciation ▶			
	12 Investments - mortgage loans			
	13 Investments - other STMT 9	0.	241,385,322.	241,385,322.
	14 Land, buildings, and equipment: basis ▶			
	Less: accumulated depreciation ▶			
	15 Other assets (describe ▶			
	16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	206,756.	373,812,898.	373,812,898.
	17 Accounts payable and accrued expenses			
	18 Grants payable			
Net Assets or Fund Balances	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶ STATEMENT 10)	25,937.	232,064.	
	23 Total liabilities (add lines 17 through 22)	25,937.	232,064.	
	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted	180,819.	373,580,834.	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ... ▶ <input type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg., and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds ...			
	30 Total net assets or fund balances	180,819.	373,580,834.	
	31 Total liabilities and net assets/fund balances	206,756.	373,812,898.	

Part III Analysis of Changes in Net Assets or Fund Balances

1 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)	1	180,819.
2 Enter amount from Part I, line 27a	2	378,031,102.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	378,211,921.
5 Decreases not included in line 2 (itemize) ▶ UNREALIZED LOSS	5	4,631,087.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	373,580,834.

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.)
1a			
b SEE ATTACHED STATEMENTS			
c			
d			
e			

(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)
a			
b			
c			
d			
e 390,106,450.		3,506,078.	386,600,372.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(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	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			
c			
d			
e			386,600,372.

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	386,600,372.
3 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). If (loss), enter -0- in Part I, line 8	{	3	N/A

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 the 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))
2014	0.	62,833.	.000000
2013			
2012			
2011			
2010			

2 Total of line 1, column (d)	2	.000000
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.000000
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5	4	212,509,161.
5 Multiply line 4 by line 3	5	0.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	3,888,339.
7 Add lines 5 and 6	7	3,888,339.
8 Enter qualifying distributions from Part XII, line 4 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.	8	6,864,098.

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

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	3,888,339.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0.
3 Add lines 1 and 2		3	3,888,339.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	3,888,339.
6 Credits/Payments:			
a 2015 estimated tax payments and 2014 overpayment credited to 2015	6a	3,885,000.	
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c	20,000.	
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	3,905,000.	
8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	16,661.	
11 Enter the amount of line 10 to be: Credited to 2016 estimated tax <input checked="" type="checkbox"/> 16,661. Refunded <input type="checkbox"/>	11	0.	

Part VII-A Statements Regarding Activities

	Yes	No
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?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see 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.		X
1c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input checked="" type="checkbox"/> \$ 0. (2) On foundation managers. <input checked="" type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input checked="" type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
3 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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		X
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?	6	X
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	X
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input checked="" type="checkbox"/> CA		
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	8b	X
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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	X
STMT 11		

Form 990-PF (2015)

Part VII-A Statements Regarding Activities (continued)

	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12	X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X
Website address ► <u>HTTP://WWW.SUNLIGHTGIVING.ORG/</u>		
14 The books are in care of ► <u>PACIFIC FOUNDATION SERVICES</u> Telephone no. ► <u>(415) 561-6540</u>		
Located at ► <u>855 EL CAMINO REAL BLDG 4, SUITE 250, PALO ALTO,</u> ZIP+4 ► <u>94301</u>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	15	N/A
16 At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►		

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.

	Yes	No
1a During the year did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(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 termination of government service, if terminating within 90 days.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	1b
Organizations relying on a current notice regarding disaster assistance check here	► <input type="checkbox"/>	
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?		1c X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If "Yes," list the years ►		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to 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.)	N/A	2b
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ►		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If "Yes," did it have excess business holdings in 2015 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 Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015.)	N/A	3b
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a X
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 2015?		4b X

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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 ☒ Nob 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)? ☐ Yes ☒ NoOrganizations 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 ☒ Nob Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ 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 ☒ Nob If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ 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.**

(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
TEGAN ACTON 855 EL CAMINO REAL, BLDG 4, SUITE 250 PALO ALTO, CA 94301	PRESIDENT 10.00	0.	0.	0.
BRIAN ACTON 855 EL CAMINO REAL, BLDG 4, SUITE 250 PALO ALTO, CA 94301	SECRETARY 1.00	0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). 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 ☐

0

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
PACIFIC FOUNDATION SERVICES - 1660 BUSH STREET, SUITE 300, SAN FRANCISCO, CA 94109	PROGRAM & ADMIN. SERVICES	469,800.
GOLDMAN, SACHS & CO. - 555 CALIFORNIA STREET, 45TH FLOOR, SAN FRANCISCO, CA 94104	INVESTMENT MANAGEMENT SERVICES	351,045.
COOLEY LLP - 101 CALIFORNIA STREET, 5TH FLOOR, SAN FRANCISCO, CA 94111	LEGAL SERVICES	56,453.

Total number of others receiving over \$50,000 for professional services 0**Part IX-A** Summary of Direct Charitable Activities

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

Part IX-B Summary of Program-Related Investments

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

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

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a Average monthly fair market value of securities	1a	85,897,527.
b Average of monthly cash balances	1b	128,767,904.
c Fair market value of all other assets	1c	1,079,910.
d Total (add lines 1a, b, and c)	1d	215,745,341.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	215,745,341.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	3,236,180.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	212,509,161.
6 Minimum investment return. Enter 5% of line 5	6	10,625,458.

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.)

1 Minimum investment return from Part X, line 6	1	10,625,458.
2a Tax on investment income for 2015 from Part VI, line 5	2a	3,888,339.
b Income tax for 2015. (This does not include the tax from Part VI.)	2b	
c Add lines 2a and 2b	2c	3,888,339.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	6,737,119.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	6,737,119.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	6,737,119.

Part XII Qualifying Distributions (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	6,864,098.
b Program-related investments - total from Part IX-B	1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:		
a 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	6,864,098.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	3,888,339.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,975,759.

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 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				6,737,119.
2 Undistributed income, if any, as of the end of 2015:				
a Enter amount for 2014 only			980.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010				
b From 2011				
c From 2012				
d From 2013				
e From 2014				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2015 from Part XII, line 4: ▶ \$ 6,864,098.				
a Applied to 2014, but not more than line 2a			980.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2015 distributable amount				6,737,119.
e Remaining amount distributed out of corpus	125,999.			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	125,999.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016				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)	0.			
8 Excess distributions carryover from 2010 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	125,999.			
10 Analysis of line 9:				
a Excess from 2011				
b Excess from 2012				
c Excess from 2013				
d Excess from 2014				
e Excess from 2015	125,999.			

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

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				
THE ALAMEDA COUNTY COMMUNITY FOOD BANK INC. 7900 EDGEWATER DRIVE OAKLAND, CA 94621		501(C)(3) PUBLIC CHARITY	GENERAL SUPPORT	100,000.
AMERICAN CIVIL LIBERTIES UNION FOUNDATION, INC. 125 BROAD STREET, 18TH FLOOR NEW YORK, NY 10004		501(C)(3) PUBLIC CHARITY	ACLU CENTENNIAL CAMPAIGN	750,000.
ASIAN AMERICANS FOR COMMUNITY INVOLVEMENT OF SANTA CLARA COUNTY 2400 MOORPARK AVE. SUITE 300 SAN JOSE, CA 95128		501(C)(3) PUBLIC CHARITY	YEAR-END HOLIDAY PROGRAMS	5,000.
BAYKEEPER (SAN FRANCISCO BAYKEEPER) 1736 FRANKLIN STREET, SUITE 800 OAKLAND, CA 94612		501(C)(3) PUBLIC CHARITY	GENERAL SUPPORT	20,000.
COASTSIDE HOPE PO BOX 1089, 99 ALHAMBRA AVE. EL GRANADA, CA 94018		501(C)(3) PUBLIC CHARITY	GENERAL SUPPORT	30,000.
Total	SEE CONTINUATION SHEET(S) ▶ 3a			6,416,600.
b Approved for future payment				
NONE				
Total	▶ 3b			0.

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

(1) Cash	1a(1)	X
(2) Other assets	1a(2)	X
b Other transactions:		
(1) Sales of assets to a noncharitable exempt organization	1b(1)	X
(2) Purchases of assets from a noncharitable exempt organization	1b(2)	X
(3) Rental of facilities, equipment, or other assets	1b(3)	X
(4) Reimbursement arrangements	1b(4)	X
(5) Loans or loan guarantees	1b(5)	X
(6) Performance of services or membership or fundraising solicitations	1b(6)	X
	1c	X



c Sharing of facilities, equipment, mailing lists, other assets, or paid employees **1c**

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.

[illegible]

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

b. If "Yes," complete the following schedule.		
(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Sign Here 	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.				May the IRS discuss this return with the preparer shown below (see instr.)? <input checked="checked" type="checkbox"/> Yes <input type="checkbox"/> No	
	Signature of officer or trustee _____		Date _____		Title PRESIDENT	
Paid Preparer Use Only	Print/Type preparer's name NANCY L. MORIARTY		Preparer's signature 		Date 10/31/16	Check <input type="checkbox"/> if self-employed PTIN P00077306
	Firm's name ▶ FRANK, RIMERMAN & CO. LLP					Firm's EIN ▶ 94-1341042
	Firm's address ▶ 1801 PAGE MILL ROAD PALO ALTO, CA 94304					Phone no. (650) 845-8100

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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.)
1a	4,773,743 SHARES FACEBOOK, INC	D	11/20/09	
b	90,339 SHARES ISHARES MSCI TAIWAN ETF	P		12/08/15
c	429 SHARES REMY INTERNATIONAL, INC. CMN	P	07/07/15	07/13/15
d	380 SHARES DOLBY LABORATORIES, INC. CMN CLASS A	P	07/07/15	07/14/15
e	221 SHARES REMY INTERNATIONAL, INC. CMN	P	07/07/15	07/14/15
f	394 SHARES GIGAMON INC CMN	P	07/07/15	07/23/15
g	400 SHARES CYTEC INDUSTRIES INC. COMMON STOCK	P	07/07/15	07/29/15
h	1 SHARE LUMENTUM HOLDINGS INC. CMN	P	07/07/15	08/04/15
i	304 SHARES CYTEC INDUSTRIES INC. COMMON STOCK	P	07/07/15	08/12/15
j	3,569 SHARES FIRST NIAGARA FINANCIAL GROUP, CMN	P	07/07/15	09/25/15
k	814 SHARES REGAL BELOIT CORP CMN	P		10/01/15
l	1,293 SHARES CHEMTURA CORPORATION CMN	P	07/07/15	10/09/15
m	4,497 SHARES DANA HOLDING CORPORATION CMN	P		10/21/15
n	80 SHARES ORMAT TECHNOLOGIES, INC. CMN	P	07/07/15	
o	3,712 SHARES FIRST NIAGARA FINANCIAL GROUP, CMN	P		10/30/15

(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)
a 386,685,585.		313.	386,685,272.
b 1,193,582.		1,305,596.	-112,014.
c 12,485.		8,969.	3,516.
d 14,199.		14,200.	-1.
e 6,470.		4,620.	1,850.
f 12,616.		12,497.	119.
g 29,543.		23,959.	5,584.
h 16.			16.
i 22,481.		18,209.	4,272.
j 37,300.		33,102.	4,198.
k 45,066.		54,612.	-9,546.
l 39,762.		34,711.	5,051.
m 76,037.		81,711.	-5,674.
n 2,993.		2,993.	0.
o 38,624.		36,533.	2,091.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(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	(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
a			386,685,272.
b			-112,014.
c			3,516.
d			-1.
e			1,850.
f			119.
g			5,584.
h			16.
i			4,272.
j			4,198.
k			-9,546.
l			5,051.
m			-5,674.
n			0.
o			2,091.

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7
If (loss), enter "-0-" in Part I, line 7 }

2

3 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).
If (loss), enter "-0-" in Part I, line 8

3

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.)
1a	2,385 SHARES CADENCE DESIGN SYSTEMS INC CMN	P		12/29/15
b	739 SHARES MERCURY SYSTEMS INC CMN	P	07/07/15	12/29/15
c	1,242 SHARES NUANCE COMMUNICATIONS, INC. CMN	P	07/07/15	12/29/15
d	1,185 SHARES MERCURY SYSTEMS INC CMN	P	07/07/15	
e	110,000 SHARES TREEHOUSE FOODS, INC. 4.875% 03/15	P	07/15/15	09/30/15
f	30,000 SHARES VALEANT PHARMACEUTICALS INTERN 5.62	P	08/12/15	11/02/15
g	20,000 SHARES BRIGHTSTAR CORP. 9.5% 12/01/2016 PV	P	09/04/15	12/11/15
h	600,000 SHARES PENN VA RESOURCE FIN CORP II 8.375	P	07/09/15	08/13/15
i	1,000,000 SHARES ANHEUSER-BUSCH INBEV WORLDWIDE 2	P	08/14/15	12/21/15
j				
k				
l				
m				
n				
o				

(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)
a 50,371.		46,623.	3,748.
b 14,108.		10,638.	3,470.
c 25,020.		20,646.	4,374.
d 22,080.		17,058.	5,022.
e 105,050.		111,640.	-6,590.
f 25,650.		30,657.	-5,007.
g 20,000.		20,234.	-234.
h 660,762.		653,128.	7,634.
i 966,650.		963,429.	3,221.
j			
k			
l			
m			
n			
o			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(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	(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
a			3,748.
b			3,470.
c			4,374.
d			5,022.
e			-6,590.
f			-5,007.
g			-234.
h			7,634.
i			3,221.
j			
k			
l			
m			
n			
o			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 }	2	386,600,372.
3 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). If (loss), enter "-0-" in Part I, line 8	3	N/A

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

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
COMMUNITY FOOD BANK OF SAN BENITO COUNTY 1133 SAN FELIPE ROAD HOLLISTER, CA 95023		501(C)(3) PUBLIC CHARITY	GENERAL SUPPORT	75,000.
COMMUNITY SERVICES AGENCY 204 STIERLIN RD, MOUNTAIN VIEW, CA 94043 MOUNTAIN VIEW, CA 94043		501(C)(3) PUBLIC CHARITY	GENERAL SUPPORT	50,000.
COMMUNITY SOLUTIONS FOR CHILDREN FAMILIES AND INDIVIDUALS 9015 MURRAY AVENUE, #100 GILROY, CA 95020		501(C)(3) PUBLIC CHARITY	YEAR-END HOLIDAY PROGRAMS	5,000.
CORA COMMUNITY OVERCOMING RELATIONSHIP ABUSE 2211 PALM AVE. SAN MATEO, CA 94402		501(C)(3) PUBLIC CHARITY	YEAR-END HOLIDAY PROGRAMS	10,000.
ECUMENICAL HUNGER PROGRAM 2411 PULGAS AVENUE EAST PALO ALTO, CA 94303		501(C)(3) PUBLIC CHARITY	GENERAL SUPPORT	50,000.
ENVIRONMENT CALIFORNIA 3435 WILSHIRE BLVD., STE. 385 LOS ANGELES, CA 90010		501(C)(3) PUBLIC CHARITY	GENERAL SUPPORT	500.
FAMILY SUPPORTIVE HOUSING INC. 692 N KING RD. SAN JOSE, CA 95133		501(C)(3) PUBLIC CHARITY	YEAR-END HOLIDAY PROGRAMS	5,000.
FOOD BANK FOR MONTEREY COUNTY 815 W. MARKET STREET, SUITE S SALINAS, CA 93901		501(C)(3) PUBLIC CHARITY	GENERAL SUPPORT	75,000.
GRANTMAKERS FOR EFFECTIVE ORGANIZATIONS 1725 DESALES ST. NW SUITE 404 WASHINGTON, DC 20036		501(C)(3) PUBLIC CHARITY	MEMBERSHIP	6,100.
HOMEFIRST SERVICES OF SANTA CLARA COUNTY 507 VALLEY WAY MILPITAS, CA 95035		501(C)(3) PUBLIC CHARITY	YEAR-END HOLIDAY PROGRAMS	5,000.
Total from continuation sheets				5,511,600.

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

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
LIFEMOVES 181 CONSTITUTION DRIVE, SUITE 100 MENLO PARK, CA 94025		501(C)(3) PUBLIC CHARITY	YEAR-END HOLIDAY PROGRAMS	15,000.
LOAVES&FISHES FAMILY KITCHEN 389 E.SANTA CLARA STREET SAN JOSE, CA 95113		501(C)(3) PUBLIC CHARITY	GENERAL SUPPORT	25,000.
MAITRI PO BOX 697 SANTA CLARA, CA 95052		501(C)(3) PUBLIC CHARITY	YEAR-END HOLIDAY PROGRAMS	5,000.
MARTHA'S KITCHEN 311 WILLOW STREET SAN JOSE, CA 95110		501(C)(3) PUBLIC CHARITY	GENERAL SUPPORT	20,000.
MONARCH SERVICES- SERVICIOS MONARCA 1685 COMMERCIAL WAY SANTA CRUZ, CA 95065		501(C)(3) PUBLIC CHARITY	YEAR-END HOLIDAY PROGRAMS	5,000.
NEXT DOOR SOLUTIONS TO DOMESTIC VIOLENCE 234 E. GISH ROAD, SUITE 200 SAN JOSE, CA 95112		501(C)(3) PUBLIC CHARITY	YEAR-END HOLIDAY PROGRAMS	5,000.
PACIFICANS CARE P.O. BOX 875 PACIFICA, CA 94044		501(C)(3) PUBLIC CHARITY	GENERAL OPERATING SUPPORT FOR PACIFICA RESOURCE CENTER	10,000.
PUENTE DE LA COSTA SUR PO BOX 554 PESCADERO, CA 94060		501(C)(3) PUBLIC CHARITY	GENERAL SUPPORT	50,000.
SOUTH COUNTY COMMUNITY HEALTH CENTER, INC DBA RAVENSWOOD FAM. HEALTH CENTER 1798A BAY ROAD EAST PALO ALTO, CA 94303		501(C)(3) PUBLIC CHARITY	PARTIALLY GENERAL SUPPORT AND PARTIALLY TO FULLY CONCLUDE THE RAVENSWOOD FAMILY HEALTH CENTER FACILITY	2,000,000.
REACHING OUT, INC. 2315 CANOAS GARDEN AVENUE SAN JOSE, CA 95125		501(C)(3) PUBLIC CHARITY	GENERAL SUPPORT	10,000.
Total from continuation sheets				

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

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
SACRED HEART COMMUNITY SERVICE 1381 SOUTH FIRST STREET SAN JOSE, CA 95110		501(C)(3) PUBLIC CHARITY	2015 BACKPACK DRIVE	20,000.
SACRED HEART COMMUNITY SERVICE 1381 SOUTH FIRST STREET SAN JOSE, CA 95110		501(C)(3) PUBLIC CHARITY	GENERAL SUPPORT	50,000.
SAMARITAN HOUSE P.O. BOX 53 BRISBANE, CA 94005		501(C)(3) PUBLIC CHARITY	GENERAL SUPPORT	75,000.
SAN FRANCISCO BALLET ASSOCIATION 455 FRANKLIN STREET SAN FRANCISCO, CA 94102		501(C)(3) PUBLIC CHARITY	GENERAL SUPPORT	10,000.
SAN FRANCISCO FOOD BANK 900 PENNSYLVANIA AVENUE SAN FRANCISCO, CA 94107		501(C)(3) PUBLIC CHARITY	GENERAL SUPPORT	50,000.
SAN FRANCISCO OCEAN FILM FESTIVAL 1007 GENERAL KENNEDY AVENUE, SUITE 205 SAN FRANCISCO, CA 94129		501(C)(3) PUBLIC CHARITY	GENERAL SUPPORT	5,000.
SAN FRANCISCO ZOOLOGICAL SOCIETY 1 ZOO ROAD SAN FRANCISCO, CA 94132		501(C)(3) PUBLIC CHARITY	ZOOMOBILE PROGRAM	5,000.
SECOND HARVEST FOOD BANK 750 CURTNER AVE. SAN JOSE, CA 95125		501(C)(3) PUBLIC CHARITY	GENERAL SUPPORT	250,000.
SECOND HARVEST FOOD BANK OF SAN JOAQUIN & STANISLAUS COUNTIES, INC. 704 E INDUSTRIAL PARK DRIVE MANTECA, CA 95337		501(C)(3) PUBLIC CHARITY	GENERAL SUPPORT	75,000.
SECOND HARVEST FOOD BANK SANTA CRUZ COUNTY 800 OHLONE PARKWAY WATSONVILLE, CA 95076		501(C)(3) PUBLIC CHARITY	GENERAL SUPPORT	100,000.
Total from continuation sheets				

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

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
SILICON VALLEY COMMUNITY FOUNDATION 2440 WEST EL CAMINO REAL, SUITE 300 MOUNTAIN VIEW, CA 94040		501(C)(3) PUBLIC CHARITY	ACLU SPIRIT CHALLENGE	250,000.
THE SOCIETY OF ST. VINCENT DE PAUL, PARTICULAR COUNCIL OF SAN MATEO COUNTY, 50 NORTH B STREET SAN MATEO, CA 94401		501(C)(3) PUBLIC CHARITY	GENERAL SUPPORT	40,000.
ST. ANTHONY'S PADUA DINING ROOM 3500 MIDDLEFIELD ROAD MENLO PARK, CA 94025		501(C)(3) PUBLIC CHARITY	GENERAL SUPPORT	15,000.
ST. JOSEPH'S FAMILY CENTER 7950 CHURCH STREET, SUITE A GILROY, CA 95020		501(C)(3) PUBLIC CHARITY	GENERAL SUPPORT	40,000.
ST. THOMAS THE APOSTLE SCHOOL 3801 BALBOA STREET SAN FRANCISCO, CA 94121		501(C)(3) PUBLIC CHARITY	TO SUPPORT SCIENCE ENRICHMENT ACTIVITIES BENEFITTING ST. THOMAS APOSTLE SCHOOL STUDENTS	10,000.
SUNNYVALE COMMUNITY SERVICES 725 KIPER ROAD SUNNYVALE, CA 94086		501(C)(3) PUBLIC CHARITY	GENERAL SUPPORT	50,000.
TABLE OF PLENTY HMB, A NONPROFIT CORPORATION PO BOX 3693 HALF MOON BAY, CA 94037		501(C)(3) PUBLIC CHARITY	GENERAL SUPPORT	5,000.
THERE WITH CARE OF THE BAY AREA 3475 EDISON WAY, SUITE H MENLO PARK, CA 94025		501(C)(3) PUBLIC CHARITY	GENERAL SUPPORT	20,000.
VMC FOUNDATION 2400 MOORPARK AVENUE, SUITE 207 SAN JOSE, CA 95128		501(C)(3) PUBLIC CHARITY	FOR TURNING WHEELS FOR KIDS	10,000.
VMC FOUNDATION 2400 MOORPARK AVENUE, SUITE 207 SAN JOSE, CA 95128		501(C)(3) PUBLIC CHARITY	THE WOMEN'S AND CHILDREN'S CENTER AT SANTA CLARA VALLEY MEDICAL CENTER- CAPITAL CAMPAIGN	2,000,000.
Total from continuation sheets				

47-1820379

3 Grants and Contributions Paid During the Year (Continuation)

523631
04-01-15

Part XV Supplementary Information**3a** Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - SOUTH COUNTY COMMUNITY HEALTH CENTER, INC DBA

RAVENSWOOD FAM. HEALTH CENTER

PARTIALLY GENERAL SUPPORT AND PARTIALLY TO FULLY CONCLUDE THE
RAVENSWOOD FAMILY HEALTH CENTER FACILITY EXPANSION CAMPAIGN ELIMINATING
ALL FACILITY LOAN PAYMENTS, AND THEN APPLY THE REMAINING GIFT BALANCE
FOR FLEXIBLE GENERAL OPERATING SUPPORT.

FORM 990-PF

GAIN OR (LOSS) FROM SALE OF ASSETS

STATEMENT 1

(A) DESCRIPTION OF PROPERTY	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD	
4,773,743 SHARES FACEBOOK, INC		11/20/09		
(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
386,685,585.	387,346,977.	0.	0.	-661,392.

(A) DESCRIPTION OF PROPERTY	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD	
90,339 SHARES ISHARES MSCI TAIWAN ETF			12/08/15	
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
1,193,582.	1,305,596.	0.	0.	-112,014.

(A) DESCRIPTION OF PROPERTY	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD	
429 SHARES REMY INTERNATIONAL, INC. CMN		07/07/15	07/13/15	
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
12,485.	9,519.	0.	0.	2,966.

(A) DESCRIPTION OF PROPERTY	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD	
380 SHARES DOLBY LABORATORIES, INC. CMN CLASS A		07/07/15	07/14/15	
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
14,199.	14,425.	0.	0.	-226.

(A) DESCRIPTION OF PROPERTY	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD	
221 SHARES REMY INTERNATIONAL, INC. CMN		07/07/15	07/14/15	
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
6,470.	4,620.	0.	0.	1,850.

(A) DESCRIPTION OF PROPERTY	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD	
394 SHARES GIGAMON INC CMN		07/07/15	07/23/15	
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
12,616.	12,497.	0.	0.	119.

(A) DESCRIPTION OF PROPERTY	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD	
400 SHARES CYTEC INDUSTRIES INC. COMMON STOCK		07/07/15	07/29/15	
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
29,543.	23,959.	0.	0.	5,584.

(A) DESCRIPTION OF PROPERTY		MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
1 SHARE LUMENTUM HOLDINGS INC. CMN			07/07/15	08/04/15
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
16.	0.	0.	0.	16.

(A) DESCRIPTION OF PROPERTY		MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
304 SHARES CYTEC INDUSTRIES INC. COMMON STOCK			07/07/15	08/12/15
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
22,481.	18,209.	0.	0.	4,272.

(A) DESCRIPTION OF PROPERTY		MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
3,569 SHARES FIRST NIAGARA FINANCIAL GROUP, CMN			07/07/15	09/25/15
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
37,300.	33,102.	0.	0.	4,198.

(A) DESCRIPTION OF PROPERTY		MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
814 SHARES REGAL BELOIT CORP CMN				10/01/15
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
45,066.	54,612.	0.	0.	-9,546.

(A) DESCRIPTION OF PROPERTY	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD	
1,293 SHARES CHEMTURA CORPORATION CMN		07/07/15	10/09/15	
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
39,762.	34,711.	0.	0.	5,051.

(A) DESCRIPTION OF PROPERTY	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD	
4,497 SHARES DANA HOLDING CORPORATION CMN			10/21/15	
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
76,037.	81,711.	0.	0.	-5,674.

(A) DESCRIPTION OF PROPERTY	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD	
80 SHARES ORMAT TECHNOLOGIES, INC. CMN		07/07/15		
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
2,993.	3,070.	0.	0.	-77.

(A) DESCRIPTION OF PROPERTY	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD	
3,712 SHARES FIRST NIAGARA FINANCIAL GROUP, CMN			10/30/15	
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
38,624.	36,533.	0.	0.	2,091.

(A) DESCRIPTION OF PROPERTY			MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
2,385 SHARES CADENCE DESIGN SYSTEMS INC CMN					12/29/15
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS	
50,371.	46,623.	0.	0.	3,748.	

(A) DESCRIPTION OF PROPERTY			MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
739 SHARES MERCURY SYSTEMS INC CMN				07/07/15	12/29/15
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS	
14,108.	10,638.	0.	0.	3,470.	

(A) DESCRIPTION OF PROPERTY			MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
1,242 SHARES NUANCE COMMUNICATIONS, INC. CMN				07/07/15	12/29/15
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS	
25,020.	20,646.	0.	0.	4,374.	

(A) DESCRIPTION OF PROPERTY			MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
1,185 SHARES MERCURY SYSTEMS INC CMN				07/07/15	
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS	
22,080.	17,058.	0.	0.	5,022.	

(A) DESCRIPTION OF PROPERTY	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
110,000 SHARES TREEHOUSE FOODS, INC. 4.875% 03/15/2022 USD SR LIEN		07/15/15	09/30/15

(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
105,050.	111,650.	0.	0.	-6,600.

(A) DESCRIPTION OF PROPERTY	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD	
30,000 SHARES VALEANT PHARMACEUTICALS INTERN 5.625% 12/01/2021 USD PVT REGS		08/12/15	11/02/15	
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
25,650.	30,675.	0.	0.	-5,025.

(A) DESCRIPTION OF PROPERTY	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD	
20,000 SHARES BRIGHTSTAR CORP. 9.5% 12/01/2016 PVT REGS SR LIEN		09/04/15	12/11/15	
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
20,000.	20,287.	0.	0.	-287.

(A) DESCRIPTION OF PROPERTY	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
600,000 SHARES PENN VA RESOURCE FIN CORP II 8.375% 06/01/2020 SER B SR LIEN		07/09/15	08/13/15

(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
660,762.	654,000.	0.	0.	6,762.

(A) DESCRIPTION OF PROPERTY	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
1,000,000 SHARES ANHEUSER-BUSCH INBEV WORLDWIDE 2.5% 07/15/2022 USD SR LIEN		08/14/15	12/21/15

(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
966,650.	961,490.	0.	0.	5,160.

CAPITAL GAINS DIVIDENDS FROM PART IV

0.

TOTAL TO FORM 990-PF, PART I, LINE 6A

-746,158.

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 2

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
GOLDMAN SACHS	823,523.	823,523.	
TOTAL TO PART I, LINE 3	823,523.	823,523.	

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 3

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
GOLDMAN SACHS	1,820,320.	0.	1,820,320.	1,820,320.	
TO PART I, LINE 4	1,820,320.	0.	1,820,320.	1,820,320.	

FORM 990-PF	LEGAL FEES			STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	56,453.	0.		63,090.
TO FM 990-PF, PG 1, LN 16A	56,453.	0.		63,090.

FORM 990-PF	ACCOUNTING FEES			STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	15,000.	9,000.		4,500.
AUDIT & TAX PREPARATION	5,000.	3,000.		1,500.
TO FORM 990-PF, PG 1, LN 16B	20,000.	12,000.		6,000.

FORM 990-PF	OTHER PROFESSIONAL FEES			STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PROGRAM & ADMIN. SERVICES				
CONSULTING FEE	469,800.	46,980.		375,840.
INVESTMENT COUNSELING	351,045.	351,045.		0.
TO FORM 990-PF, PG 1, LN 16C	820,845.	398,025.		375,840.

FORM 990-PF	TAXES			STATEMENT	7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FEDERAL TAXES	3,890,007.	0.			0.
FOREIGN TAXES	112.	0.			0.
STATE FILING FEES	85.	0.			0.
TO FORM 990-PF, PG 1, LN 18	3,890,204.	0.			0.

FORM 990-PF	OTHER EXPENSES			STATEMENT	8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
COMPUTER EXPENSE	5,578.	0.			0.
DUES & SUBSCRIPTIONS	115.	0.			313.
CREDIT CARD FEES	70.	0.			0.
SUPPLIES	395.	0.			275.
REGISTRATION FEES	3,300.	330.			1,980.
TO FORM 990-PF, PG 1, LN 23	9,458.	330.			2,568.

FORM 990-PF	OTHER INVESTMENTS	STATEMENT	9
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
GS INVESTMENTS - OTHER (FIXED INCOME)	FMV	14,699,722.	14,699,722.
GSAM FI HIGH YIELD - OTHER	FMV	15,855,974.	15,855,974.
GOVT FI (TIPS) - OTHER	FMV	26,293,832.	26,293,832.
GOV/CORP FI - OTHER	FMV	77,093,336.	77,093,336.
GS INVESTMENTS - OTHER (SECURITIES)	FMV	98,899,008.	98,899,008.
NEUBERGER BERMAN SCV - OTHER	FMV	8,431,871.	8,431,871.
UNSETTLED TRADES	FMV	111,579.	111,579.
TOTAL TO FORM 990-PF, PART II, LINE 13		241,385,322.	241,385,322.

FORM 990-PF	OTHER LIABILITIES	STATEMENT	10
DESCRIPTION	BOY AMOUNT	EOY AMOUNT	
ACCRUED EXPENSES	25,937.	227,058.	
FEDERAL TAXES PAYABLE	0.	5,006.	
TOTAL TO FORM 990-PF, PART II, LINE 22	25,937.	232,064.	

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	11
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NAME OF CONTRIBUTOR	ADDRESS
BRIAN ACTON	855 EL CAMINO REAL, BLDG 4, SUITE 250 PALO ALTO, CA 94301

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and
its instructions is at www.irs.gov/form990

OMB No. 1545-0047

2015

Name of the organization

SUNLIGHT GIVING

Employer identification number

47-1820379

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)() (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

SUNLIGHT GIVING

47-1820379

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BRIAN ACTON C/O FRANK, RIMERMAN + CO LLP, 1801 PAGE MILL RD PALO ALTO, CA 94133	\$ 340,079,974.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2	BRIAN ACTON C/O FRANK, RIMERMAN + CO LLP, 1801 PAGE MILL RD PALO ALTO, CA 94133	\$ 47,267,003.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

SUNLIGHT GIVING**47-1820379****Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	4,333,333 SHARES OF FACEBOOK, INC.	\$ 340,079,974.	05/11/15
2	440,410 SHARES OF FACEBOOK, INC.	\$ 47,267,003.	11/06/15
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization SUNLIGHT GIVING	Employer identification number 47-1820379
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee