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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 INTREPID PHILANTHROPY FOUNDATION		A Employer identification number 30-0527867	
Number and street (or P O box number if mail is not delivered to street address) 44 MONTGOMERY STREET NO 1400	Room/suite	B Telephone number (see instructions) (415) 543-0733	
City or town, state or province, country, and ZIP or foreign postal code SAN FRANCISCO, CA 94104		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <div><input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change</div>		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) <input checked="" type="checkbox"/> \$ 4,796,982	J 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 )	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) (see instructions) )

	(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 (attach schedule)	600,000		
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B			
	3 Interest on savings and temporary cash investments	2,103	2,103	
	4 Dividends and interest from securities	20,377	70,536	
	5a Gross rents			
	b Net rental income or (loss)			
	6a Net gain or (loss) from sale of assets not on line 10	-11,492		
	b Gross sales price for all assets on line 6a			
		623,882		
	7 Capital gain net income (from Part IV, line 2)		42,050	
	8 Net short-term capital gain			
	9 Income modifications			
Operating and Administrative Expenses	10a Gross sales less returns and allowances			
	b Less Cost of goods sold			
	c Gross profit or (loss) (attach schedule)			
	11 Other income (attach schedule)	18,300	9,642	18,300
	12 Total. Add lines 1 through 11	629,288	124,331	18,300
	13 Compensation of officers, directors, trustees, etc	0	0	0
	14 Other employee salaries and wages			
	15 Pension plans, employee benefits			
	16a Legal fees (attach schedule)	1,418	142	0
	b Accounting fees (attach schedule)	6,300	3,150	0
	c Other professional fees (attach schedule)	173,793	0	0
	17 Interest		79,316	
	18 Taxes (attach schedule) (see instructions)	10,845	963	0
	19 Depreciation (attach schedule) and depletion			
	20 Occupancy			
	21 Travel, conferences, and meetings	75,730	0	0
	22 Printing and publications	282	0	0
23 Other expenses (attach schedule)	25,672	44,585	0	
24 Total operating and administrative expenses. Add lines 13 through 23	294,040	128,156	0	
25 Contributions, gifts, grants paid	856,477			
26 Total expenses and disbursements. Add lines 24 and 25	1,150,517	128,156	0	
	27 Subtract line 26 from line 12			
	a Excess of revenue over expenses and disbursements	-521,229		
	b Net investment income (if negative, enter -0-)		0	
	c Adjusted net income (if negative, enter -0-)			18,300

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form 990-PF (2018)

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 (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing . . . . .	1,352,423	993,881	993,881
	2	Savings and temporary cash investments . . . . .		103,552	103,552
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____	779,421		0
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .	726	2,389	2,389
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) . . . . .			
	c	Investments—corporate bonds (attach schedule) . . . . .	298,143	260,222	226,561
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans . . . . .			
	13	Investments—other (attach schedule) . . . . .	1,849,695	2,499,695	3,470,599
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	4,280,408	3,859,739	4,796,982	
Liabilities	17	Accounts payable and accrued expenses . . . . .	31,993	32,553	
	18	Grants payable . . . . .	565,000	665,000	
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule) . . . . .			
	22	Other liabilities (describe ▶ _____)			
	23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	596,993	697,553	
	Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
24		Unrestricted . . . . .	3,683,415	3,162,186	
25		Temporarily restricted . . . . .			
26		Permanently restricted . . . . .			
<b>Foundations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 27 through 31.</b>					
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		<b>Total net assets or fund balances</b> (see instructions) . . . . .	3,683,415	3,162,186	
31		<b>Total liabilities and net assets/fund balances</b> (see instructions) .	4,280,408	3,859,739	

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	3,683,415
2	Enter amount from Part I, line 27a . . . . .	2	-521,229
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3 . . . . .	4	3,162,186
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	3,162,186

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

<b>(a)</b> 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>(b)</b> How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo , day, yr )	<b>(d)</b> Date sold (mo , day, yr )
<b>1a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>(e)</b> Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	<b>(g)</b> Cost or other basis plus expense of sale	<b>(h)</b> Gain or (loss) (e) plus (f) minus (g)
<b>a</b> See Additional Data Table			
<b>b</b>			
<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			<b>(l)</b> Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
<b>(i)</b> F M V as of 12/31/69	<b>(j)</b> Adjusted basis as of 12/31/69	<b>(k)</b> Excess of col (i) over col (j), if any	
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss) <div style="float: right; font-size: small;">           { If gain, also enter in Part I, line 7            If (loss), enter -0- in Part I, line 7         </div>	<b>2</b>	42,050
<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	<b>3</b>	

**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	1,085,308	5,036,869	0 215473
2016	1,076,593	5,133,697	0 209711
2015	970,304	5,902,534	0 164388
2014	755,523	6,326,854	0 119415
2013	460,677	6,483,682	0 071052
<b>2</b> Total of line 1, column (d)			<b>2</b> 0 780039
<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			<b>3</b> 0 156008
<b>4</b> Enter the net value of noncharitable-use assets for 2018 from Part X, line 5			<b>4</b> 4,866,479
<b>5</b> Multiply line 4 by line 3			<b>5</b> 759,210
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)			<b>6</b> 0
<b>7</b> Add lines 5 and 6			<b>7</b> 759,210
<b>8</b> Enter qualifying distributions from Part XII, line 4			<b>8</b> 1,014,745

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)**

<b>1a</b>	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>b</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 . . . . .	<b>1</b>	0
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	0
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	0
<b>6</b>	Credits/Payments		
<b>a</b>	2018 estimated tax payments and 2017 overpayment credited to 2018	<b>6a</b>	9,560
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	0
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	0
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	9,560
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>	0
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	<b>10</b>	9,560
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2019 estimated tax</b> <input type="checkbox"/> 9,560 <b>Refunded</b> <input type="checkbox"/>	<b>11</b>	0

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	<b>1a</b>	No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). . . . . If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ 0 (2) On foundation managers <input type="checkbox"/> \$ 0		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0		
<b>2</b> 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	<b>2</b>	No
<b>3</b> 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 . . . . .	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>	No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . If "Yes," attach the statement required by General Instruction T	<b>5</b>	No
<b>6</b> 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? . . . . .	<b>6</b>	Yes
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV . . . . .	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> CA		
<b>b</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 .	<b>8b</b>	Yes
<b>9</b> 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 2018 or the taxable year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV . . . . .	<b>9</b>	No
<b>10</b> Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses . . . . .	<b>10</b>	No

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	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. . . . .	<b>11</b>		<b>No</b>
<b>12</b>	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. . . . .	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>WWW INTREPID-PHILANTHROPY ORG</b>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of <b>PACIFIC FOUNDATION SERVICES</b> Telephone no <b>(415) 561-6540</b>			

Located at **1660 BUSH STREET 300 SAN FRANCISCO CA** ZIP+4 **94109**

<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here . . . . . <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . <b>15</b>		
<b>16</b>	At any time during calendar year 2018, 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? . . . . . See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country <b>▶</b>	<b>16</b>	<b>Yes</b> <b>No</b>

**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.**

<b>1a</b>	During the year did the foundation (either directly or indirectly)		<b>Yes</b>	<b>No</b>
	(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? ( <b>Exception.</b> 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>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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. . . . . Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>	<b>1b</b>		
<b>c</b>	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 2018? . . . . .	<b>1c</b>		<b>No</b>
<b>2</b>	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))			
<b>a</b>	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <b>▶</b> 20____, 20____, 20____, 20____			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions). . . . .	<b>2b</b>		
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here <b>▶</b> 20____, 20____, 20____, 20____			
<b>3a</b>	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>b</b>	If "Yes," did it have excess business holdings in 2018 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 2018). . . . .	<b>3b</b>		
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</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 2018?	<b>4b</b>		<b>No</b>

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

<b>5a</b>	During the year did the foundation pay or incur any amount to		<b>Yes</b>	<b>No</b>
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> 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.		<b>5b</b>	
	Organizations relying on a current notice regarding disaster assistance check here.	<input checked="" type="checkbox"/>		
<b>c</b>	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? If "Yes," attach the statement required by Regulations section 53.4945–5(d)	<input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>6a</b>	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>6b</b>	<b>No</b>
<b>b</b>	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870			
<b>7a</b>	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>7b</b>	
<b>b</b>	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?			
<b>8</b>	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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

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

<b>1 List all officers, directors, trustees, foundation managers and their compensation. See instructions</b>				
(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
KAREN LESHNER 44 MONTGOMERY STREET SUITE 1400 SAN FRANCISCO, CA 94104	FOUNDER & PRESIDENT 8 00	0	0	0
REBECCA K PAYNE 44 MONTGOMERY STREET SUITE 1400 SAN FRANCISCO, CA 94104	DIRECTOR 1 25	0	0	0
DAVID WAGONFELD 44 MONTGOMERY STREET SUITE 1400 SAN FRANCISCO, CA 94104	TREASURER 1 25	0	0	0
JOANNE SCHNEIDER 44 MONTGOMERY STREET SUITE 1400 SAN FRANCISCO, CA 94104	SECRETARY 1 25	0	0	0
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
(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				
<b>Total number of other employees paid over \$50,000.</b>				0

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

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ROCKEFELLER PHILANTHROPY ADVISORS	ADVISING	130,053
44 MONTGOMERY STREET SUITE 1400		
SAN FRANCISCO, CA 94104		
<b>Total</b> 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
<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 . . . . . ▶	0

**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>	544,622
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	945,721
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	3,450,245
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	4,940,588
<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>	4,940,588
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	74,109
<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>	4,866,479
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	243,324

**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>	243,324
<b>2a</b>	Tax on investment income for 2018 from Part VI, line 5.	<b>2a</b>	
<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>	0
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	243,324
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	18,300
<b>5</b>	Add lines 3 and 4.	<b>5</b>	261,624
<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>	261,624

**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>	1,014,745
<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>	1,014,745
<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>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	1,014,745

**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				261,624
<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. . . . .	147,405			
<b>b</b> From 2014. . . . .	447,900			
<b>c</b> From 2015. . . . .	680,885			
<b>d</b> From 2016. . . . .	800,270			
<b>e</b> From 2017. . . . .	839,431			
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	2,915,891			
<b>4</b> Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ <u>1,014,745</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. . . . .				261,624
<b>e</b> Remaining amount distributed out of corpus	753,121			
<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			0
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,669,012			
<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). . . . .	147,405			
<b>9</b> <b>Excess distributions carryover to 2019.</b> Subtract lines 7 and 8 from line 6a . . . . .	3,521,607			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2014. . . . .	447,900			
<b>b</b> Excess from 2015. . . . .	680,885			
<b>c</b> Excess from 2016. . . . .	800,270			
<b>d</b> Excess from 2017. . . . .	839,431			
<b>e</b> Excess from 2018. . . . .	753,121			

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

<b>1a</b> 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>b</b> Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)					
<b>2a</b> 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.)**

<b>1 Information Regarding Foundation Managers:</b>	
<b>a</b> 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) ) KAREN LESHNER	
<b>b</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	
<b>2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:</b>	
Check here <input type="checkbox"/> 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.	
<b>a</b> The name, address, and telephone number or email address of the person to whom applications should be addressed  See Additional Data Table	
<b>b</b> The form in which applications should be submitted and information and materials they should include  See Additional Data Table	
<b>c</b> Any submission deadlines  See Additional Data Table	
<b>d</b> Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors  See Additional Data Table	

**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>				

Enter gross amounts unless otherwise indicated

(See worksheet in line 13 instructions to verify calculations )

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.)
---------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Form **990-PF** (2018)

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

<b>1</b> 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?		<b>Yes</b>	<b>No</b>
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of			
<b>(1)</b> Cash.	<b>1a(1)</b>		<b>No</b>
<b>(2)</b> Other assets.	<b>1a(2)</b>		<b>No</b>
<b>b</b> Other transactions			
<b>(1)</b> Sales of assets to a noncharitable exempt organization.	<b>1b(1)</b>		<b>No</b>
<b>(2)</b> Purchases of assets from a noncharitable exempt organization.	<b>1b(2)</b>		<b>No</b>
<b>(3)</b> Rental of facilities, equipment, or other assets.	<b>1b(3)</b>		<b>No</b>
<b>(4)</b> Reimbursement arrangements.	<b>1b(4)</b>		<b>No</b>
<b>(5)</b> Loans or loan guarantees.	<b>1b(5)</b>		<b>No</b>
<b>(6)</b> Performance of services or membership or fundraising solicitations.	<b>1b(6)</b>		<b>No</b>
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	<b>1c</b>		<b>No</b>
<b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</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 <b>(d)</b> the value of the goods, other assets, or services received.			

(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 ☒ No

**b** If "Yes," complete the following schedule

(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.

<b>Sign Here</b>	*****	2019-05-13	*****	May the IRS discuss this return with the preparer shown below? (see instr )? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Signature of officer or trustee	Date	Title	

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	TAMARA L MCINERNEY		2019-05-13		P00011797
	Firm's name ▶ BPM LLP				Firm's EIN ▶ 81-4234542
	Firm's address ▶ 4200 BOHANNON DRIVE SUITE 250 MENLO PARK, CA 940251021				Phone no (650) 855-6800

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
List and describe the kind(s) of property sold (e g , real estate, (a) 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 )
1 AB FINANCIAL SERVICES OPPORTUNITIES DELAWARE FUND, LP PASSTHROUGH	P		
1 AB FINANCIAL SERVICES OPPORTUNITIES DELAWARE FUND, LP PASSTHROUGH	P		
AILANTHUS CAPITAL PARTNERS PASSTHROUGH	P		
AILANTHUS CAPITAL PARTNERS PASSTHROUGH	P		
ECHO STREET CAPITAL PARTNERS QP, LP PASSTHROUGH	P		
ECHO STREET CAPITAL PARTNERS QP, LP PASSTHROUGH	P		
LYON STREET INVESTORS, LP PASSTHROUGH	P		
LYON STREET INVESTORS, LP PASSTHROUGH	P		
POTRERO CAPITAL RESEARCH PARTNERS, LP PASSTHROUGH	P		
POTRERO CAPITAL RESEARCH PARTNERS, LP PASSTHROUGH	P		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
1,449			1,449
22			22
3,018			3,018
1,569			1,569
20,977			20,977
39,571			39,571
		271,643	-271,643
115,344			115,344
47,427			47,427
74,180			74,180

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) 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	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
			1,449
			22
			3,018
			1,569
			20,977
			39,571
			-271,643
			115,344
			47,427
			74,180

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

List and describe the kind(s) of property sold (e g , real estate, <b>(a)</b> 2-story brick warehouse, or common stock, 200 shs MLC Co )	<b>(b)</b> How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo , day, yr )	<b>(d)</b> Date sold (mo , day, yr )
SOMA PARTNERS, LP PASSTHROUGH	P		
1 SOMA PARTNERS, LP PASSTHROUGH	P		
PUBLICLY TRADED SECURITIES			
PUBLICLY TRADED SECURITIES			

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

<b>(e)</b> Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	<b>(g)</b> Cost or other basis plus expense of sale	<b>(h)</b> Gain or (loss) (e) plus (f) minus (g)
13,476			13,476
8,393			8,393
7,148		7,455	-307
291,308		302,734	-11,426

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			<b>(l)</b> Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
<b>(i)</b> F M V as of 12/31/69	<b>(j)</b> Adjusted basis as of 12/31/69	<b>(k)</b> Excess of col (i) over col (j), if any	
			13,476
			8,393
			-307
			-11,426

**Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

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

JOANNE SCHNEIDER JESSE OSTROFF ROCK  
44 MONTGOMERY STREET SUITE 1400  
SAN FRANCISCO, CA 94104  
(415) 543-0734

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

INFORMATION SUBMITTED VIA EMAIL PROJECT SCOPE (IF APPLICABLE) AND BUDGET, ORGANIZATIONAL FINANCIALS AND TAX-EXEMPT DOCUMENTATION

- c** Any submission deadlines

N/A, CASE-BY-CASE

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

GRANTS MAY NOT BE USED FOR LOBBYING

**Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

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

JOANNE SCHNEIDER JESSE OSTROFF ROCK  
44 MONTGOMERY STREET SUITE 1400  
SAN FRANCISCO, CA 94104  
(415) 543-0734

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

APPLICATIONS ARE SUBMITTED VIA AN ONLINE FORM INFORMATION INCLUDES PROJECT NARRATIVE, TEAM MEMBER INFORMATION, SCHOOL INFORMATION, BUDGET OUTLINE

- c** Any submission deadlines

LOIS DUE MID-OCTOBER, SELECT LOIS ARE INVITED TO APPLY WITH A DUE DATE OF MID-JANUARY

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

SEE [HTTP //LIGHTAWARDS ORG/ELIGIBILITY/](http://lightawards.org/eligibility/)

**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>				
ACLU NORTHERN CALIFORNIA 40 DRUMM ST SAN FRANCISCO SAN FRANCISCO, CA 94111	NONE	PC	FOR GENERAL OPERATING SUPPORT	5,000
ALVARADO ELEMENTARY PTA 625 DOUGLASS STREET SAN FRANCISCO, CA 94114	NONE	PC	LIGHT AWARDS PROJECT TITLED "ALVARADO ASSISTIVE TECHNOLOGY TEAM"	20,000
BREAKTHROUGH SILICON VALLEY 1635 PARK AVENUE SAN JOSE, CA 95126	NONE	PC	FOR GENERAL OPERATING SUPPORT	50,000
<b>Total . . . . . ▶ 3a</b>				755,000

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>				
CHINESE EDUCATION CENTER (SFUSD) 657 MERCHANT STREET SAN FRANCISCO, CA 94111	NONE	GOV	LIGHT AWARDS PROJECT TITLED "MAKING ENGLISH LANGUAGE DEVELOPMENT HANDS-ON FOR NEW SPEAKERS OF ENGLISH"	10,000
COMMUNITY SCIENCE WORKSHOP NETWORK PO BOX 1307 SANGER, CA 93657	NONE	PC	IN HONOR OF LIGHT ADVISOR ROBERT PRONOVOST	1,000
DAVIS JOINT UNIFIED SCHOOL DISTRICT 526 B STREET DAVIS, CA 95616	NONE	GOV	LIGHT AWARDS PROJECT TITLED "BRINGING WORLD LANGUAGES ALIVE IN DAVIS JOINT UNIFIED"	10,000
<b>Total . . . . . ▶ 3a</b>				755,000

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>				
DE MARILLAC ACADEMY 175 GOLDEN GATE AVENUE SAN FRANCISCO, CA 94102	NONE	PC	LIGHT AWARDS PROJECT TITLED "IMPROVING PERSONALIZED LEARNING SCHOOL-WIDE, 4-8"	20,000
DEMOCRACY NOW PRODUCTIONS INC 207 WEST 25TH STREET 11TH FLOOR NEW YORK, NY 10001	NONE	PC	FOR GENERAL OPERATING SUPPORT	5,000
DONORSCHOOSEORG 134 WEST 37TH STREET 11TH FLOOR NEW YORK, NY 10018	NONE	PC	FOR "GIFT CARDS"	5,000
<b>Total . . . . .</b> ► <b>3a</b>				755,000

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>				
DONORSCHOOSEORG 134 WEST 37TH STREET 11TH FLOOR NEW YORK, NY 10018	NONE	PC	FOR "GIFT CARDS"	5,000
EAST PALO ALTO ACADEMY FOUNDATION PO BOX 50803 PALO ALTO, CA 94303	NONE	PC	LIGHT AWARDS PROJECT TITLED "VERTICAL ALIGNMENT OF SCHOOL-WIDE ADVISORY CURRICULUM"	20,000
EAST PALO ALTO KIDS FOUNDATION PO BOX 50542 PALO ALTO, CA 94303	NONE	PC	FOR GENERAL OPERATING SUPPORT	5,000
<b>Total . . . . . ▶ 3a</b>				755,000

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>				
EAST SIDE UNION HIGH SCHOOL DISTRICT 830 NORTH CAPITOL AVENUE SAN JOSE, CA 95020	NONE	GOV	LIGHT AWARDS PROJECT TITLED "LEADERSHIP WITH PASSION"	20,000
EDUCATION FOR CHANGE 333 HEGENBERGER ROAD SUITE 600 OAKLAND, CA 94621	NONE	PC	LIGHT AWARDS PROJECT TITLED "BE GLAD AT LAZEAR"	10,000
EL VERANO ELEMENTARY SCHOOL SONOMA VALLEY UNIFIED SCHOOL DISTRICT 18606 RIVERSIDE DRIVE SONOMA, CA 95476	NONE	GOV	LIGHT AWARDS PROJECT TITLED "DEVELOPING READERS & LEADERS IN OUR SCHOOL COMMUNITY"	10,000
<b>Total . . . . . ▶ 3a</b>				755,000

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>				
EVERGREEN SCHOOL DISTRICT 3188 QUIMBY ROAD SAN JOSE, CA 95148	NONE	GOV	LIGHT AWARDS PROJECT TITLED "LEARNING TO BE GLAD"	20,000
GUTTMACHER INSTITUTE 125 MAIDEN LANE 7TH FLOOR NEW YORK, NY 10038	NONE	PC	FOR GENERAL OPERATING SUPPORT FOR DOMESTIC WORK	10,000
INIAN ISLANDS INSTITUTEPO BOX 225 BUSTAVUS, AR 99826	NONE	PC	FOR GENERAL OPERATING SUPPORT	4,000
<b>Total . . . . . ▶ 3a</b>				755,000

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>				
ISRAAID (US) GLOBAL HUMANITARIAN ASSISTANCE INC PO BOX 61227 PALO ALTO, CA 94306	NONE	PC	FOR GENERAL OPERATING SUPPORT	3,000
JANE'S DUE PROCESSPO BOX 685137 AUSTIN, TX 78768	NONE	PC	FOR GENERAL OPERATING SUPPPORT	10,000
KHAN ACADEMYPO BOX 1630 MOUNTAIN VIEW, CA 94042	NONE	PC	FOR THE TEACHER AMBASSADOR PROGRAM	50,000
<b>Total . . . . . ▶ 3a</b>				755,000

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>				
KITCHEN TABLE ADVISORS 150 POST STREET SUITE 342 SAN FRANCISCO, CA 94108	NONE	PC	FOR KITCHEN TABLE ADVISORS	5,000
KRAUSE CENTER FOR INNOVATION 12345 EL MONTE ROAD LOS ALTOS HILLS, CA 94022	NONE	PC	FOR GENERAL OPERATING SUPPORT	25,000
LATHROP ELEMENTARY SCHOOL MANTECA UNIFIED SCHOOL DISTRICT 15851 SOUTH 5TH STREET LATHROP, CA 95330	NONE	GOV	LIGHT AWARDS PROJECT TITLED "LATHROP ELEMENTARY STEAM TEAM"	10,000
<b>Total . . . . . ▶ 3a</b>				755,000

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>				
LOS ALTOS COMMUNITY FOUNDATION 183 HILLVIEW ROAD LOS ALTOS, CA 94022	NONE	PC	FOR MVLA SCHOLARS	1,000
LOS ALTOS COMMUNITY FOUNDATION 183 HILLVIEW ROAD LOS ALTOS, CA 94022	NONE	PC	FOR MVLA SCHOLARS	10,000
MEDICAL STUDENTS FOR CHOICE PO BOX 40935 PHILADELPHIA, PA 19107	NONE	PC	FOR GENERAL OPERATING SUPPORT	5,000
<b>Total . . . . .</b> ► <b>3a</b>				755,000

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>				
MILLS COLLEGE 5000 MACARTHUR BOULEVARD OAKLAND, CA 94613	NONE	PC	LIGHT AWARDS PROJECT TITLED "ENCINAL'S CYCLE OF INQUIRY COMMITTEE LOOKING CLOSELY"	20,000
MILLS COLLEGE 5001 MACARTHUR BOULEVARD OAKLAND, CA 94614	NONE	PC	FOR MILLS TEACHER SCHOLARS	5,000
MONTEREY PENINSULA UNIFIED SCHOOL DISTRICT PO BOX 1031 MONTEREY, CA 93942	NONE	GOV	LIGHT AWARDS PROJECT TITLED "UPPER GRADE WRITING DEVELOPMENT"	20,000
<b>Total . . . . . ▶ 3a</b>				755,000

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>				
MORGAN HILL UNIFIED SCHOOL DISTRICT 15600 CONCORD CIRCLE MORGAN HILL, CA 95037	NONE	GOV	LIGHT AWARDS PROJECT TITLED "BARRETT TEACHER LEARNING LAB"	20,000
MOUNTAIN VIEW LOS ALTOS HIGH SCHOOL DISTRICT 1299 BRYANT AVENUE MOUNTAIN VIEW, CA 94040	NONE	GOV	LIGHT AWARDS PROJECT TITLED "BUILDING MOUNTAIN VIEW TEACHER LEADERSHIP CAPACITY"	10,000
NARAL PRO-CHOICE AMERICA FOUNDATION 1156 15TH STREET NW SUITE 700 WASHINGTON, DC 20005	NONE	PC	FOR GENERAL OPERATING SUPPORT	5,000
<b>Total . . . . . ▶ 3a</b>				755,000

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>				
NEW TEACHER CENTER 110 COOPER STREET 5TH FLOOR SANTA CRUZ, CA 95060	NONE	PC	FOR GENERAL OPERATING SUPPORT	50,000
OAKLAND PUBLIC EDUCATION FUND PO BOX 27148 OAKLAND, CA 94602	NONE	PC	LIGHT AWARDS PROJECT TITLED "CUES SPANISH TEACHER PROFESSIONAL LEARNING COMMUNITY"	10,000
OAKLAND PUBLIC EDUCATION FUND PO BOX 27148 OAKLAND, CA 94602	NONE	PC	LIGHT AWARDS PROJECT TITLED "PROJECT BASED LEARNING TO IMPROVE EQUITY IN LEARNING"	20,000
<b>Total . . . . . ▶ 3a</b>				755,000

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>				
OAKLAND PUBLIC EDUCATION FUND PO BOX 27148 OAKLAND, CA 94602	NONE	PC	FOR LIFE ACADEMY	1,000
OREGON FOOD BANK 7900 NE 33RD DRIVE PORTLAND, OR 97211	NONE	PC	FOR GENERAL OPERATING SUPPORT	2,000
PAUL REVERE ELEMENTARY SCHOOL PTA 555 TOMPKINS AVENUE SAN FRANCISCO, CA 94110	NONE	PC	LIGHT AWARDS PROJECT TITLED "SI SE PUEDE (RE)BUILDING COMMUNITY THROUGH TEACHER DEVELOPMENT"	20,000
<b>Total . . . . . ▶ 3a</b>				755,000

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>				
PENINSULA BRIDGEPO BOX 963 MENLO PARK, CA 94026	NONE	PC	FOR GENERAL OPERATING SUPPORT	4,000
PHYSICIANS FOR REPRODUCTIVE HEALTH INC 55 WEST 39TH STREET SUITE 1001 NEW YORK, NY 10018	NONE	PC	FOR GENERAL OPERATING SUPPORT	3,000
PLANNED PARENTHOOD FEDERATION OF AMERICA INC 123 WILLIAM STREET NEW YORK, NY 10038	NONE	PC	FOR U S -BASED WORK	10,000
<b>Total . . . . . ▶ 3a</b>				755,000

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>				
RAVENSWOOD CITY SCHOOL DISTRICT 2120 EUCLID AVENUE EAST PALO ALTO, CA 94303	NONE	GOV	LIGHT AWARDS PROJECT TITLED ORCHESTRA TEACHER PROFESSIONAL DEVELOPMENT"	10,000
RAVENSWOOD EDUCATION FOUNDATION PO BOX 396 MENLO PARK, CA 94026	NONE	PC	FOR GENERAL OPERATING SUPPORT	1,000
SAN JOSE UNIFIED SCHOOL DISTRICT 855 LENZEN AVENUE SAN JOSE, CA 95126	NONE	GOV	LIGHT AWARDS PROJECT TITLED "LINCOLN HIGH SCHOOL AP SUCCESS & EQUITY PROJECT"	10,000
<b>Total . . . . .</b> ► <b>3a</b>				755,000

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 LORENZO UNIFIED SCHOOL DISTRICT 15510 USHER STREET SAN LORENZO, CA 94580	NONE	GOV	LIGHT AWARDS PROJECT "REVOLUTIONIZING CLIMATE CHANGE EDUCATION"	20,000
SOUTHERN POVERTY LAW CENTER 400 WASHINGTON AVENUE MONTGOMERY, AL 36104	NONE	PC	FOR GENERAL OPERATING SUPPORT	5,000
SPARK SF PUBLIC SCHOOLS 135 VAN NESS AVENUE ROOM 119 SAN FRANCISCO, CA 94102	NONE	PC	LIGHT AWARDS PROJECT TITLED "O'CONNELL HIGH SCHOOL MATHEMATICS & INDUSTRY CURRICULUM REDESIGN"	10,000
<b>Total . . . . . ▶ 3a</b>				755,000

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>				
SPARK SF PUBLIC SCHOOLS 135 VAN NESS AVENUE ROOM 119 SAN FRANCISCO, CA 94102	NONE	PC	LIGHT AWARDS PROJECT TITLED "PROJECT BASED LEARNING TO DEVELOP LANGUAGE SKILLS"	20,000
ST LUKE'S ROOSEVELT HOSPITAL CENTER 428 WEST 59TH STREET NEW YORK, NY 10019	NONE	PC	FOR THE CRIME VICTIMS TREATMENT CENTER	5,000
STANFORD UNIVERSITY 485 LASUEN MALL STANFORD, CA 94305	NONE	PC	FOR CALIFORNIA SUBJECT EXAMINATIONS FOR TEACHERS (CSET)	1,000
<b>Total . . . . . ▶ 3a</b>				755,000

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>				
TEACH FOR AMERICA INC 711 WEST 40TH STREET SUITE 356 BALTIMORE, MD 21211	NONE	PC	FOR THE ALUMNI LEADERSHIP NETWORK IN THE BAY AREA	50,000
THE AVALON ACADEMY 818 MAHLER ROAD BURLINGAME, CA 94010	NONE	PC	FOR GENERAL OPERATING SUPPORT	4,000
THE OPPORTUNITY TRUST 4660 MARYLAND AVENUE SUITE 260 ST LOUIS, MO 63108	NONE	PC	FOR GENERAL OPERATING SUPPORT	10,000
<b>Total . . . . . ▶ 3a</b>				755,000

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> Paid during the year				
THE RECTORS AND VISITORS OF THE UNIVERSITY OF VIRGINIA 1001 NORTH EMMET ST CHARLOTTESVILLE, VA 22904	NONE	PC	FOR THE CONTEMPLATIVE SCIENCES CENTER	50,000
TRUST WOMEN FOUNDATION PO BOX 3222 WICHITA, KS 67201	NONE	PC	FOR GENERAL OPERATING SUPPORT	10,000
Total . . . . . ▶ <b>3a</b>				755,000

**TY 2018 Accounting Fees Schedule****Name:** INTREPID PHILANTHROPY FOUNDATION**EIN:** 30-0527867

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ACCOUNTING FEES	6,300	3,150	0	3,150

# TY 2018 Investments Corporate Bonds Schedule

**Name:** INTREPID PHILANTHROPY FOUNDATION

**EIN:** 30-0527867

## Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
VANGUARD SHORT TERM BOND FUND	260,222	226,561

**TY 2018 Investments - Other Schedule****Name:** INTREPID PHILANTHROPY FOUNDATION**EIN:** 30-0527867**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>
AB FINANCIAL SERVICES OPPORTUNITIES DELAWARE FUND LP	AT COST	150,000	101,554
AILANTHUS CAPITAL PARTNERS (QP)	AT COST	500,000	565,401
ECHO STREET CAPITAL PARTNERS	AT COST	500,000	671,758
LYON STREET INVESTORS, LP	AT COST	487,298	670,103
POTRERO CAPITAL RESEARCH PARTNERS, LP	AT COST	362,397	929,672
SOMA PARTNERS LP	AT COST	500,000	532,111

**TY 2018 Legal Fees Schedule****Name:** INTREPID PHILANTHROPY FOUNDATION**EIN:** 30-0527867

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
LEGAL FEES	1,418	142	0	2,215

**TY 2018 Other Expenses Schedule****Name:** INTREPID PHILANTHROPY FOUNDATION**EIN:** 30-0527867**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK FEES	5	0	0	0
BUSINESS EXPENSES	1,125	0	0	0
DUES AND SUBSCRIPTIONS	1,901	0	0	4,290
INVESTMENT EXPENSES	1,798	44,585	0	0
INSURANCE	1,976	0	0	0
OTHER EXPENSES	162	0	0	0
PUBLICATIONS AND REFERENCE	11,000	0	0	11,000
WEB HOSTING FEES	3,529	0	0	3,529
WED DEVELOPMENT COSTS	1,142	0	0	1,142
LIGHT AWARDS EXPENSE	3,034	0	0	3,034

**TY 2018 Other Income Schedule****Name:** INTREPID PHILANTHROPY FOUNDATION**EIN:** 30-0527867**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
PASSTHROUGH INVESTMENTS	0	9,642	
RETURNED GRANTS	18,300		18,300

**TY 2018 Other Professional Fees Schedule****Name:** INTREPID PHILANTHROPY FOUNDATION**EIN:** 30-0527867

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ADVISORY FEES	130,053	0	0	128,250
MANAGEMENT FEES	27,740	0	0	27,740
ADVISORY BOARD STIPENDS	16,000	0	0	16,000

**TY 2018 Taxes Schedule****Name:** INTREPID PHILANTHROPY FOUNDATION**EIN:** 30-0527867

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES PASSTHROUGH	0	963	0	0
STATE TAXES AND FEES	105	0	0	105
EXCISE TAX	10,740	0	0	0

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93491133034359							
<div>Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service</div>		<div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF</div> <div>▶ Go to <a href="http://www.irs.gov/Form990">www.irs.gov/Form990</a> for the latest information</div>			<div>OMB No 1545-0047</div> <div>2018</div>						
<div>Name of the organization</div> INTREPID PHILANTHROPY FOUNDATION				<div>Employer identification number</div> 30-0527867							
<div>Organization type (check one)</div>											
<div>Filers of:</div> <div>Form 990 or 990-EZ</div> <div>Form 990-PF</div>						<div>Section:</div> <div><input type="checkbox"/> 501(c)( ) (enter number) organization</div> <div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation</div> <div><input type="checkbox"/> 527 political organization</div> <div><input checked="" type="checkbox"/> 501(c)(3) exempt private foundation</div> <div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation</div> <div><input type="checkbox"/> 501(c)(3) taxable private foundation</div>					
<div>Check if your organization is covered by the <b>General Rule</b> or a <b>Special Rule</b>.</div> <div><b>Note.</b> Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions</div>											
<div>General Rule</div> <div><input checked="" type="checkbox"/> 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 other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.</div>											
<div>Special Rules</div> <div><input type="checkbox"/> For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% 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.</div> <div><input type="checkbox"/> 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 <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.</div> <div><input type="checkbox"/> 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 <i>exclusively</i> 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 <i>exclusively</i> religious, charitable, etc., purpose. Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . ▶ \$</div>											
<div><b>Caution.</b> An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it <b>must</b> 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 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).</div>											
<div>For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF</div> <div>Cat No 30613X</div> <div>Schedule B (Form 990, 990-EZ, or 990-PF) (2018)</div>											

<b>Name of organization</b> INTREPID PHILANTHROPY FOUNDATION	<b>Employer identification number</b> 30-0527867
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**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	KAREN LESHNER 44 MONTGOMERY STREET SUITE 1400 SAN FRANCISCO, CA 94104	\$ 600,000	Person <input checked="" 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 )
		\$	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 )

Employer identification number

30-0527867

<b>Part II</b>	<b>Noncash Property</b>
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(a) No. from Part I	(b) Description of noncash property given <small>(See instructions) Use duplicate copies of Part II if additional space is needed.</small>	(c) FMV (or estimate) <small>(See instructions)</small>	(d) Date received
		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) <small>(See instructions)</small>	(d) Date received
		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) <small>(See instructions)</small>	(d) Date received
		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) <small>(See instructions)</small>	(d) Date received
		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) <small>(See instructions)</small>	(d) Date received
		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) <small>(See instructions)</small>	(d) Date received
		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) <small>(See instructions)</small>	(d) Date received
		\$ _____	_____

<b>Name of organization</b> INTREPID PHILANTHROPY FOUNDATION	<b>Employer identification number</b> 30-0527867
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<b>Part III</b>	<b>Exclusively</b> 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 <b>exclusively</b> religious, charitable, etc., contributions of <b>\$1,000 or less</b> for the year. (Enter this information once. See instructions.) ▶ \$ _____ Use duplicate copies of Part III if additional space is needed
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(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	
	_____	_____	_____
	_____	_____	_____
	(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	