Form 990-PF

OMB No	1545-0052
2(0	17

Department of the Treasury

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 for instructions and the latest information.

	alendar year 2017 or tax year beginning	02	/06, 2017, and endir	19	12/31, <b>20</b> 17
SNA	of foundation		<del></del>	A Employer identi	fication number
	R FOUNDATION			61-181701	. 4
Numb	er and street (or P O box number if mail is not delivered	to street address)	Room/suite	B Telephone numl	per (see instructions)
277	2 DONALD DOUGLAS LOOP NORTH			(800) 83	39-1754
City o	r town, state or province, country, and ZIP or foreign pos	stal code		C If exemption applic	eation is
SAN	ITA MONICA, CA 90405			pending, check her	
	eck all that apply X Initial return	Initial return o	of a former public chari	ty D 1 Foreign organiza	ations, check here
	Final return	Amended ret		2 Foreign organiz	
	Address change	Name change	•	85% test, check computation	here and attach
	eck type of organization X Section 501		111		on status was terminated
	Section 4947(a)(1) nonexempt charitable trust	Other taxable pri		under section 507(	b)(1)(A), check here . 🕨 📖
	r market value of all assets at JAcco	• —	ash Accrual		s in a 60-month termination
		ther (specify)		under section 507(	b)(1)(B), check here .
		column (d) must be on cas	sh basis )		(d) Disbursements
Part	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	for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received (attach schedule).	52,207,500.	40 - 4 4 - 4	. •	
1 2	Check I If the foundation is not required to		,	•	
3	Interest on savings and temporary cash investments.	498.	498.		
4	Dividends and interest from securities				
5a	Gross rents				
b	Net rental income or (loss)			•	
의 6a	Net gain or (loss) from sale of assets not on line 10				-
Reverue 2	Gross sales price for all assets on line ba			P.F	CEIVED .
7	Capital gain net income (from Part IV, line 2).		0.	111	ULIVLD
œ  <sub>8</sub>	Net short-term capital gain				8
9 10 a	Income modifications	<u>.</u>	*** n p_ * 1 - 1	<u> </u>	T 2 8 2019   O
	and allowances	, , , , , , , , , , , , , , , , , , ,	1 4 4 A A A		
	Less Cost of goods sold . L. Gross profit or (loss) (attach schedule)	-	,	I UG	DEN. UI
11	Other income (attach schedule)				
12	Total Add lines 1 through 11	52,297,998.	498.		
13	Compensation of officers, directors, trustees, etc	0.		···-	
Se 14	Other employee salaries and wages				
<b>5</b> 15	Pension plans, employee benefits				
<b>₽</b> 16a	Legal fees (attach schedule)				
w I	Accounting fees (attach schedule)	340	240		
E	Other professional fees (attach schedule).[1]	342.	342.	<del> </del>	<del>                                     </del>
E 17	Interest				<del> </del>
18	Taxes (attach schedule) (see instructions)				
19	Depreciation (attach schedule) and depletion.				+
	Occupancy			_	+
D 21	Travel, conferences, and meetings				
E 22	Printing and publications				
Operating 24 25 25	Other expenses (attach schedule) Total operating and administrative expenses				
era era	Add lines 13 through 23	342.	342.		
<u>ڇا.</u>	Contributions, gifts, grants paid				
U125	Total expenses and disbursements Add lines 24 and 25	342.	342.		(
O 25 26	1	G •			1 4 to 13 17 1 1 1 1 1 1
_	Subtract line 26 from line 12	]			1 - ·
26 27	Subtract line 26 from line 12 Excess of revenue over expenses and disbursements	52,297,656.	जिल्ला स्थापनी इस्तारी है।		1 2 N 1 2 M
26 27 a		J	156.		1 y y 1 , 1 min

	Attached schedules and amounts in the	Beginning of year	End	of year
Pari	Balance Sheets description column should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing			
2			100,156.	100,156
3	-	1 4 4 4 W 1	and the same	1 - 162 + 1 + 5 1 Car in
	Less allowance for doubtful accounts ▶			
4				
7	Less allowance for doubtful accounts ▶		•	
5				
1	Receivables due from officers, directors, trustees, and other			
6				•
_	disqualified persons (attach schedule) (see instructions)			†
7	• • • • • • • • • • • • • • • • • • • •		-	
,,	Less allowance for doubtful accounts ▶			
8 G			<u> </u>	
Assets	Prepaid expenses and deferred charges		<u> </u>	<u>-</u>
1.0	* · · · · · · · · · · · · · · · · · · ·			10 570 050
	b Investments - corporate stock (attach schedule) ATCH, 2		52,169,250.	48,578,250
	c Investments - corporate bonds (attach schedule)			
111	and equipment basis	•	4.6 4 9	
	Less accumulated depreciation (attach schedule)			
12	,	_		
13				
14	Land, buildings, and equipment basis			, , , ,
	Less accumulated depreciation			
15	(attach schedule) Other assets (describe ► ATCH 3 )		28,250	. 28,250
16				
'"	instructions Also, see page 1, item I)		52,297,656.	48,706,656
+-			4=,==,,==	
17	Accounts payable and accrued expenses			
<u>,</u> 18	Grants payable	<del></del>		-
19	Deferred revenue		<u> </u>	_
Liabilities 20 21 22	Loans from officers, directors, trustees, and other disqualified persons			-
[ 21	Mortgages and other notes payable (attach schedule)			-
၂ 22	Other liabilities (describe )			4
23	Total liabilities (add lines 17 through 22)	0.	0	<u>: </u>
	Foundations that follow SFAS 117, check here			
alances 25	and complete lines 24 through 26, and lines 30 and 31.			
Ĕ 24	Unrestricted		<u> </u>	
	Temporarily restricted			
<u>m</u>  26	Permanently restricted			
<u> </u>	Foundations that do not follow SFAS 117, check here			
피	and complete lines 27 through 31.			
Net Assets or Fund B 26 28 30 31	Capital stock, trust principal, or current funds			
約 2.	Paid-in or capital surplus, or land, bldg, and equipment fund			7
38 20	Retained earnings, accumulated income, endowment, or other funds	-	52,297,656.	.]
ڏ  ''	Total net assets or fund balances (see instructions)	0.	52,297,656	_
텔织	Total liabilities and net assets/fund balances (see	<del>.</del>		1
اد اح		0.	52,297,656	
Davi	instructions)		32,237,030	<u>'L</u>
			must agree with	T
	otal net assets or fund balances at beginning of year - Part			
	nd-of-year figure reported on prior year's return)			52 207 656
	nter amount from Part I, line 27a			52,297,656
	other increases not included in line 2 (itemize) ▶			
	dd lines 1, 2, and 3			52,297,656
5 D	ecreases not included in line 2 (itemize) ▶			
6 T	otal net assets or fund balances at end of year (line 4 minus	s line 5) - Part II, column (	(b), line 30 6	52,297,656

- •

ao	e	3

Pai	(a) List and des	and Losses for Tax on Invescribe the kind(s) of property sold (for each warehouse, or common stock, 200	example, real estate,	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1 a						
b						
c				_		
<u>d</u>				_		
<u>e</u>			1		L	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo: ((e) plus (f) mini	
a b						
С					· <del>-</del> ·	
d				ļ		
е						
	Complete only for assets s	howing gain in column (h) and owned	by the foundation on 12/31/69		Gains (Col (h) ga	
(	i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	(k), but not less to Losses (from co	
a				ļ		
<u>b</u>				ļ		
<u> </u>	***					
<u>d</u>				1	· · · · · · · · · · · · · · · · · · ·	
2 3		ain or (loss) as defined in sections	ain, also enter in Part I, line 7 oss), enter -0- in Part I, line 7 s 1222(5) and (6) structions If (loss), enter -0- in	2		·
	-			3		
Pai			duced Tax on Net Investment I	ncome		
Was		Toda o tillo pari olarini	F AVAILABLE FOR INITIAL putable amount of any year in the boom of complete this part		_	Yes No
1	Enter the appropriate ar	mount in each column for each ye	ar, see the instructions before mak	ing any er	ntries	
Cale	(a)  Base penod years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution ra (col (b) divided by	
	2016			1	<u> </u>	
	2015					
	2014					-
	2013		1			
	2012					
 2 3			de the total on line 2 by 5 0, or by	2		
J	-		if less than 5 years	3		
4	Enter the net value of no	oncharitable-use assets for 2017 t	from Part X, line 5	4		
5	Multiply line 4 by line 3.			5		
6						
7	Add lines 5 and 6				<del></del>	<del>-</del>
8	Enter qualifying distribut If line 8 is equal to or given Part VI instructions	tions from Part XII, line 4 greater than line 7, check the box	x in Part VI, line 1b, and complete	8 that par	t using a 1% ta	ax rate. See th

orm	990-PF (2017) SNAP FOUNDATION 61-181	_		age 4
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	<u>nstru</u>	ction	s)
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1 Date of ruling or determination letter (attach copy of letter if necessary - see instructions)  Domestic foundations that meet the section 4940(e) requirements in Part V, check			: 3.
	here > and enter 1% of Part I, line 27b			1
С	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-)			
3	Add lines 1 and 2			3.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			<u>3.</u>
6	Credits/Payments			
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a			
b	Exempt foreign organizations - tax withheld at source			,
	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			0
7	Total credits and payments Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			3.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			<u> </u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
1				
	t VII-A Statements Regarding Activities	1	Voc	No
та	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	1a	Yes	No X
L	participate or intervene in any political campaign?			
D		1b		х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			<del></del>
	published or distributed by the foundation in connection with the activities			
_	Did the foundation file Form 1120-POL for this year?	1c		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
•	(1) On the foundation $\blacktriangleright$ \$ (2) On foundation managers $\blacktriangleright$ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
_	on foundation managers   \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
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	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that		v	
	conflict with the state law remain in the governing instrument?	6	<u> X</u>	
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	
	Enter the states to which the foundation reports or with which it is registered. See instructions.   CA,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		v	
_	(or designate) of each state as required by General Instruction G <sup>2</sup> 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 2017 or the tax year beginning in 2017? See the instructions for Part XIV If "Yes,"	9		x .
_	complete Part XIV	•	_	<del></del>
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses . ATCH. 4	10	Х	

Form	990-PF (2017) SNAP FOUNDATION 61-181701	14_	F	Page 5
Pai	rt 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	1	ļ	Х
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	2		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	3	Х	
	Website address   WWW.SNAPFOUNDATION.ORG			
14	The books are in care of ▶ SNAP FOUNDATION Telephone no ▶ 800-839-17	754		
	Located at ▶2772 DONALD DOUGLAS LOOP NORTH SANTA MONICA, CA ZIP+4 ▶ 90405			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		. ▶	
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	6		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country ▶			- 1
Pai	rt 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)	7		' '
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			4
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	- }		
	disqualified person?	ľ		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		,	. [
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			, · · · · · · · · · · · · · · · · · · ·
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	1		
	the benefit or use of a disqualified person)?	٠	- :1	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		·	٠. ا
	foundation agreed to make a grant to or to employ the official for a period after	u I		
	termination of government service, if terminating within 90 days ) Yes X No	ŀ		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	<u></u> .		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	b		Х
	Organizations relying on a current notice regarding disaster assistance, check here	-		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	_ .		اـــا
	were not corrected before the first day of the tax year beginning in 2017?	С		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		٢	*.3
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	١	. [	,
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and	1	·	
	6e, Part XIII) for tax year(s) beginning before 2017?			
	If "Yes," list the years	-		
ь	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	''	İ	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	_ .		لـــا
	all years listed, answer "No" and attach statement - see instructions )	b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			. 1
	▶ <u> </u>	- 1		1
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	1	ļ	
	at any time during the year?	1		
b	olf "Yes," did it have excess business holdings in 2017 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			, I
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of	1		
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	.		لنــا
	foundation had excess business holdings in 2017 )	ь		<u> </u>
4a	<u>-</u>	а		Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	.		السيدا
		b		X

Par	t VII-B	Statements Regarding Activities	for Which Form	4720 May Be Req	uired (continued)			
5a	During th	e year, did the foundation pay or incur any amo	ount to				Yes	No
	(1) Carry	on propaganda, or otherwise attempt to influe	ence legislation (section	n 4945(e))?	. Yes X No			- }
	(2) Influe	ence the outcome of any specific public ele	ection (see section 4	4955), or to carry or	i,			ì
	٠,,	ly or indirectly, any voter registration drive?	•					;
		de a grant to an individual for travel, study, or o				.		۱ '
		de a grant to an organization other than a	• •				1	
		on 4945(d)(4)(A)? See instructions	-					Ι,
		de for any purpose other than religious, ch			. — —			١,
		eses, or for the prevention of cruelty to children						] ,
ь		nswer is "Yes" to 5a(1)-(5), did any of the						١,
b		ns section 53 4945 or in a current notice regard			•			
		tions relying on a current notice regarding disas					+	<del>  ,</del>
_	•					$\square$		Ι.
С		swer is "Yes" to question 5a(4), does the						
		t maintained expenditure responsibility for the g			res No	'		
_		attach the statement required by Regulations se	, ,					
6a		foundation, during the year, receive any fun			[]			
		onal benefit contract?					-	.,
Ь		oundation, during the year, pay premiums, dire	ectly or indirectly, on a	personal benefit contra	ict <sup>7</sup>	6b	+	X
		o 6b, file Form 8870			□ □			
7a		ne during the tax year, was the foundation a pa				' l		
b		did the foundation receive any proceeds or have Information About Officers, Director						
	t VIII	and Contractors		_		noyees,		
1	List all of	fficers, directors, trustees, foundation n						
		(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) Exper	nse accor	
ATC	H 5			0.	0.			0.
		<u> </u>						
2	"NONE."	sation of five highest-paid employees	(other than thos	se included on line		ons). If i	none,	enter
(a)	Name and a	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) Exper	nse accor Illowance	
	NONE							
_								
Total	number o	of other employees paid over \$50,000		<u> </u>	<del> </del>			
					<del></del>	- 00	N DE	

Form 990-PF (2017)		Page <b>7</b>
Part VIII Information About Officers, Directors, Trustees, Foundation Ma and Contractors (continued)	anagers, Highly Paid Employ	ees,
3 Five highest-paid independent contractors for professional services. See in	structions. If none, enter "NONE	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE .		
		0
		<del></del>
T-4-1		
Total number of others receiving over \$50,000 for professional services	<u> </u>	<del></del>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic organizations and other beneficianes served, conferences convened, research papers produced, etc.	al information such as the number of	Expenses
1 N/A		
2		
3		
	<del></del>	
4		
Part IX-B Summary of Program-Related Investments (see instructions)	<u> </u>	·
Describe the two largest program-related investments made by the foundation during the tax year on lines	l and 2	Amount
1 NONE		
		<del></del>
2		
All other program-related investments. See instructions		
3 NONE		
		<del></del>
Total. Add lines 1 through 3	<b>&gt;</b>	

Page 8

Par	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign fou	indations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes	j	
а	Average monthly fair market value of securities	1a	4,416,205.
b	Average of monthly cash balances	1b	77,351.
C	Fair market value of all other assets (see instructions),	1c	
d	<b>Total</b> (add lines 1a, b, and c)	1d	4,493,556.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	4,493,556.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	67,403.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	4,426,153.
6	Minimum investment return. Enter 5% of line 5	6	199,480.
Pai	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations, check here ▶ and do not complete this part)	ndations	<b>S</b>
1	Minimum investment return from Part X, line 6	1	199,480.
2 a	Tax on investment income for 2017 from Part VI, line 5 2a 3 .		
b	Income tax for 2017 (This does not include the tax from Part VI).		
	Add lines 2a and 2b	2c	3.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	199,477.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4	5	199,477.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1,	7	199,477.
Pa	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b See instructions		0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		0.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca	alculatir	ng whether the foundation
	qualifies for the section 4940(e) reduction of tax in those years.		

a	q	е	ţ

Рa	Part XIII Undistributed Income (see instructions)							
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017			
'					199,477.			
_	line 7:		- 11					
_	Undistributed income, if any, as of the end of 2017							
	Enter amount for 2016 only			· <del></del>				
	Total for pnor years 20 15 ,20 14 ,20 13	· ·			<del></del>			
	Excess distributions carryover, if any, to 2017		1					
7	From 2012	* *		,				
b	From 2013	7 , 7	. , , , , , , , , , , , , , , , , , , ,					
-	From 2014	i.		•	•			
đ	From 2015	• • • • • • • • • • • • • • • • • • • •						
е	From 2016		. '	, , , ,	· • · · · · · · · · · · · · · · · · · ·			
f	Total of lines 3a through e		\ n					
4	Qualifying distributions for 2017 from Part XII,	,	' '.					
	line 4 ▶ \$				* 1			
	Applied to 2016, but not more than line 2a							
b	Applied to undistributed income of prior years							
	(Election required - see instructions),							
C	Treated as distributions out of corpus (Election		1 1/4		·			
	required - see instructions)							
	Applied to 2017 distributable amount		•		<del></del>			
	Remaining amount distributed out of corpus				· · · · · ·			
5	Excess distributions carryover applied to 2017							
	(If an amount appears in column (d), the same amount must be shown in column (a))				·			
6	Enter the net total of each column as		•		,			
	indicated below:							
a	Corpus Add lines 3f, 4c, and 4e Subtract line 5							
b	Prior years' undistributed income Subtract							
	line 4b from line 2b							
C	Enter the amount of prior years' undistributed			ļ				
	income for which a notice of deficiency has been issued, or on which the section 4942(a)							
	tax has been previously assessed							
d	Subtract line 6c from line 6b Taxable							
۳	amount - see instructions							
е	Undistributed income for 2016 Subtract line							
	4a from line 2a Taxable amount - see instructions							
f	Undistributed income for 2017 Subtract lines							
	4d and 5 from line 1 This amount must be distributed in 2018				199,477.			
			• " " " ! :					
7	Amounts treated as distributions out of corpus		,		,			
	to satisfy requirements imposed by section		1 3 4 4					
	170(b)(1)(F) or 4942(g)(3) (Election may be							
	regulred see instructions)				,			
8	Excess distributions carryover from 2012 not			4 4 4				
	applied on line 5 or line 7 (see instructions)			•	* * * * * * * * * * * * * * * * * * * *			
ā	Excess distributions carryover to 2018. Subtract lines / and 8 from line 6a	n,	,	• • • • • • • • • • • • • • • • • • •				
10	Analysis of line 9		.,	4				
	Excess from 2013							
	Excess from 2014							
	Excess from 2015	1 11	10. 10. 10. 10. 10.		, , , , , , , , , , , , , , , , , , , ,			
	Excess from 2016			# # # # # # # # # # # # # # # # # # #	1			
	Ежечь Гон 2017	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		•				
e	EXCOSS HOM 2017	12 12 12 12 12 12 12 12 12 12 12 12 12 1	1 1 1 2 2 1 1 1 1	1 144	· · · · · · · · · · · · · · · · · · ·			

orm	990-PF (2017)	SNAP FOUN	DATTON			61-1817014	Page <b>10</b>
		erating Foundations		nd Part VII-A, quest	ion 9)		PLICABLE
	If the foundation has				1		7
	foundation, and the ruling	_			▶		
b	Check box to indicate v		_		section	4942(j)(3),or	4942(j)(5)
<b>.</b>		Tax year		Prior 3 years			
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) T	otai
	I or the minimum investment						
	return from Part X for each year listed						
b	85% of line 2a			-			
С	Qualifying distributions from Part XII, line 4 for each year listed						
d	Amounts included in line 2c not used directly for active conduct of exempt activities						
е	Qualifying distributions made						
	directly for active conduct of exempt activities. Subtract line						
	2d from line 2c						
3	Complete 3a, b, or c for the alternative test relied upon						
а	"Assets" alternative test - enter		/				
	<ol> <li>Value of all assets</li> <li>Value of assets qualifying under section</li> </ol>						
	4942(j)(3)(B)(i)						
b	"Endowment" afternative test- enter 2/3 of minimum invest-						
	ment return shown in Part X,						
	line 6 for each year listed						
С	"Support" alternative test - enter						
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)).		:				
	or royalties)		_				
	provided in section 4942 (j(X3)(B)(iii)						
	(3) Largest amount of sup- port from an exempt						
	organization						
2.0	(4) Gross investment income .	ton Information (C	`amplete this mant	antició de la facilida	tion had to 0	20. 22 22 22	
	any time dເ	ntary Information (Curing the year - see	instructions.)				
	Information Regarding			than 20/ of the tot	al agatabutiana	socowod by the (	foundation
а	List any managers of the before the close of any						loundation
_	NONE	the foundation who	100/	46416		0.1	
	List any managers of ownership of a partner					equally large port	ion of the
	N/A						
2	Information Regarding	Contribution, Grant.	Gift, Loan, Scholarsh	ip, etc., Programs:			
	Check here ► X if the unsolicited requests for	or funds. If the founda	ation makes gifts, gra	to preselected char nts, etc., to individua	itable organizati	ons and does n	ot accept conditions,
	complete items 2a, b, c	<u> </u>			_		
а	The name, address, ar	nd telephone number o	or email address of th	e person to whom app	olications should t	e addressed	
b	The form in which appl	ications should be sub	mitted and informatio	n and materials they	should include		

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

c Any submission deadlines

Page **11** 

Part XV Supplementary Information (	continued)			
3 Grants and Contributions Paid During Recipient Name and address (home or business)	ng the Year or Appr	oved for F	uture Payment	
, Recipient	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	contribution	· · ·
a Paid during the year	1			
				i
				Į
				•
			ĺ	
	•			
				1
		•		
	1			
				]
				i
Total	<u> </u>	<u> </u>	3a	
b Approved for future payment				
			İ	
			1	
				}
		<u>L</u>		
Total			▶ 3b	

ممدح	1	2
-age		4

Part XVI-A Analysis of Income-Prod	ucing Act	ivities			
Enter gross amounts unless otherwise indicated	(a)	(b)	(c)	y section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
a	_		ļ		
b					
c			<del> </del>		<del></del> :-
d					
e f					
g Fees and contracts from government agencies			<del>                                     </del>		<del></del>
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments •			14	498.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate		ı	ļ. <u>,</u>	1 , 1	
a Debt-financed property					
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income			<del> </del>		
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events · · ·					
<ul><li>10 Gross profit or (loss) from sales of inventory</li><li>11 Other revenue a</li></ul>					
b			† · · · · ·		
c			<u> </u>		
d					
e					
12 Subtotal Add columns (b), (d), and (e)				498.	<u></u>
13 Total. Add line 12, columns (b), (d), and (e)				13	498.
(See worksheet in line 13 instructions to verify calcil Part XVI-B Relationship of Activities			D		
Explain below how each activity accomplishment of the foundation					
				· · · · · · -	
			<u>-</u>		
				<del></del> -	
			<u> </u>		<del></del>
				-	
		<u>-</u>			
		<del></del>	<del></del>		<del></del>
		_			
					_
		<del></del>		<del></del>	
<del></del>					

Form 990-PF (201	SNAP	FOUNDATION		_6	1-1817014	Page
Part XVII	Information Regarding		Transactions and	Relationships Wit	h Noncharita	able

1				engage in any of the					Yes	No
		• • •	than section	501(c)(3) organization	ons) or in	section 527, i	elating to political			
	_	izations?				_				
а		•	=	a noncharitable exem						17
								1a(1)		<u>x</u>
					• • • • •		· · · · · · · · · · · · · · ·	1a(2)		
þ		transactions						45.43		Х
				npt organization				1b(1)		X
				ble exempt organization						×
				assets						×
										×
										X
c				ts, other assets, or pai						Х
			_	s," complete the folio					fair m	arket
				ces given by the repo						
				gement, show in colur						
(a) L	ine no	(b) Amount involved	(c) Name of n	oncharitable exempt organiz	ation	(d) Description of tra	nsfers, transactions, and sha	nng arra	ıngeme	nts
		N/A			1	N/A				
							<del>_</del>			
			<u> </u>							
							<del> </del>			
		·	<del></del>							
			<del> </del>				<u>-</u>			
			<del> </del>		-					
			+							
-			+							
				<del>-</del>	<u> </u>					
		·-	+		-					
	1- 45-			United with the second		r more toy ever	ent organizations			
28				iliated with, or relate ction 501(c)(3)) or in s				T Y	es X	No
h		s," complete the follo		2000 30 I(C)(3)) oi in s	ection 327 /	·				
		(a) Name of organization		(b) Type of orga	nızatıon		(c) Description of relations	hip		
							-			
				···						
	Unde	er penalties of perjury I declered	lare that I have examin	ned this return, including acco axpayer) is based on all informati	mpanying schedu	ules and statements, and parer has any knowledge	d to the best of my knowledg	e and b	elief, it	is true
Sigi		(LII)	Marie Trans		<b>\</b>	T	May the IRS	discus	s this	retum
Her		- Market	<u> </u>	10/0/19	<u></u>	1 LANSON		parer s	hown L	
nei	E   Sig	nature of officer or vistee	· \	Date	Title	le	See instruction	s <u>X</u>	Yes	No
		V				<u> </u>		7TIA:		
Paid	4	Print/Type preparer's na		Preparer's signature		Date	Culeck     "	PTIN		_
		JEFFREY D HAS		JEFFREY D HA	SKELL	09/19	<del></del>	P013		U
	parer		OUNDATION SO				Firm's EIN ► 5103	1834		
USE	Only		NE HOLLOW LI			11040		20 1'	7 = 4	
		Li Li	AKE SUCCESS	, NY	**	11042	Phone no 800-8	m <b>99</b> (		(2047)
							FO	ブブし	y-1'1'	(2017)

## Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

## Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2017

Employer identification number

SNAP FOUNDATION 61-1817014 Organization type (check one) Filers of: Section: 501(c)( Form 990 or 990-EZ ) (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 [X] 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. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: 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 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 doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Employer identification number 61-1817014

Part I	Contributors (see instructions) Use duplicate copies	s of Part I if additional space is ne	eded.
(a) No.	. (b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	MURPHY, ROBERT C.  2772 DONALD DOUGLAS LOOP NORTH  SANTA MONICA, CA 90405	\$ 52,169,250.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	SNAP INC.  2772 DONALD DOUGLAS LOOP NORTH  SANTA MONICA, CA 90405	\$ 128,250.	Person X Payroll X Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		   \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization SNAP FOUNDATION

Employer identification number 61-1817014

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed

raitii	Troncasti Froperty (see instructions) ose duplicate copies	or rait in additional opaco io riot	,,,,,
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
11	SNAP INC. SNAP, 3325000 SH.	\$\$\$\$	12/11/2017
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	DOMAIN NAME - SNAP		02/06/2017
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

Name of organization SNAP FOUNDATION

Employer identification number

61-1817014

th co U	10) that total more than \$1,000 for the following line entry. For organization ontributions of \$1,000 or less for the se duplicate copies of Part III if additional and the following contents.	ns completing Part year (Enter this in	t III, enter the total of formation once. So	of exclusively religious, charitable, etc
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transf	er of gift	
	Transferee's name, address, and	ZIP + 4	Relation	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transf		nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transf	er of gift	
	Transferee's name, address, and	ZIP + 4	Relation	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
	Tunnafara la mana addar a mad	(e) Transf		noble of transferor to transferor
	Transferee's name, address, and	ZIF + 4	Keiatio	nship of transferor to transferee

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or

SNAP FOUNDATION

## FORM 990PF, PART I - OTHER PROFESSIONAL FEES

	NET. INVESTMENT	INCOME	342.	342.
REVENUE	ANU EXPENSES	PER BOOKS	342.	342.
		DESCRIPTION	INVESTMENT MANAGEMENT SERVICES	TOTALS

SNAP FOUNDATION

2
1ENT
ACHI
ATT

	STOCK
	OR PORA'I'
	1
1	_
	ART II
	SOPE, PART II

DESCRIPTION	

SNAP INC.

48,578,250.
52,169,250.
TOTALS

48,578,250.

52,169,250.

ENDING FMV

ENDING BOOK VALUE

PART II - OTHER ASSETS FORM 990PF,

DESCRIPTION

ENDING BOOK VALUE

28,250. ENDING FMV

DOMAIN NAME - SNAP

TOTALS

28,250.

28,250.

28,250.

ATTACHMENT 3

2017 FORM 990-PF

61-1817014

ATTACHMENT

PART VII-A, LINE 10 - SUBSTANTIAL CONTRIBUTORS FORM 990PE,

SNAP FOUNDATION

NAME AND ADDRESS

MURPHY, ROBERT C. 2772 DONALD DOUGLAS LOOP NORTH SANTA MONICA, CA 90405 ATTACHMENT 5

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

EXPENSE ACCT AND OTHER ALLOWANCES		·		·	. 0	0.
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	°	· o	· 0	0	.0	0
COMPENSATION	.0	0	.0	0	.0	0.
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	DIR 1.00	DIR, SEC 1.00	DIR, TREAS 1.00	DIR, PRES 1.00	ASSISTANT SECRETARY 1.00	GRAND TOTALS
NAME AND ADDRESS	SARAH ALI 2772 DONALD DOUGLAS LOOP NORTH SANTA MONICA, CA 90405	KELLY KAGAN LAW 2772 DONALD DOUGLAS LOOP NORTH SANTA MONICA, CA 90405	BETSY KENNY LACK 2772 DONALD DOUGLAS LOOP NORTH SANTA MONICA, CA 90405	MARY RITTI 2772 DONALD DOUGLAS LOOP NORTH SANTA MONICA, CA 90405	ATUL PORWAL 2772 DONALD DOUGLAS LOOP NORTH SANTA MONICA, CA 90405	