

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.
 ▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

OMB No 1545-0052
2017
Open to Public Inspection

For calendar year 2017, or tax year beginning 07-01-2017, and ending 06-30-2018

Name of foundation KLA-TENCOR FOUNDATION		A Employer identification number 77-0557004	
Number and street (or P.O. box number if mail is not delivered to street address) ONE TECHNOLOGY DRIVE		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code MILPITAS, CA 95035		B Telephone number (see instructions) (408) 875-5169	
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		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) ▶ \$ 25,800,889		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)	3,998,685			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	15,248	15,248		
	4 Dividends and interest from securities	329,699	329,699		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	-1,715			
	b Gross sales price for all assets on line 6a 15,357,565				
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain				
	9 Income modifications				
	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)	6,068	6,068	0		
12 Total. Add lines 1 through 11	4,347,985	351,015	0		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	116,513	0	0	0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	9,323	0	0	0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	48,754	16,338	0	32,416
	24 Total operating and administrative expenses. Add lines 13 through 23	174,590	16,338	0	32,416
	25 Contributions, gifts, grants paid	1,500,413			1,500,413
26 Total expenses and disbursements. Add lines 24 and 25	1,675,003	16,338	0	1,532,829	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	2,672,982				
b Net investment income (if negative, enter -0-)		334,677			
c Adjusted net income (if negative, enter -0-)			0		

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	2,428,901	1,774,656	1,774,656
	2 Savings and temporary cash investments	20,885,814	1,450,965	1,450,965
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (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			
	10a Investments—U S and state government obligations (attach schedule)	0	10,390,682	10,319,931
	b Investments—corporate stock (attach schedule)	0	12,307,465	12,255,337
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	23,314,715	25,923,768	25,800,889	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable	434,200	434,200	
	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 ▶ _____)	4,500	0	
23 Total liabilities (add lines 17 through 22)	438,700	434,200		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted	22,876,015	25,489,568	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg, and equipment fund			
29 Retained earnings, accumulated income, endowment, or other funds				
30 Total net assets or fund balances (see instructions)	22,876,015	25,489,568		
31 Total liabilities and net assets/fund balances (see instructions)	23,314,715	25,923,768		

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	22,876,015
2 Enter amount from Part I, line 27a		2	2,672,982
3 Other increases not included in line 2 (itemize) ▶ _____		3	16,146
4 Add lines 1, 2, and 3		4	25,565,143
5 Decreases not included in line 2 (itemize) ▶ _____		5	75,575
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30		6	25,489,568

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day , yr)	(d) Date sold (mo , day , yr)
1a See Additional Data Table			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a See Additional Data Table			
b			
c			
d			
e			

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

2 Capital gain net income or (net capital loss)	2	-1,715
{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

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

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

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

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2016	359,473	23,292,626	0 015433
2015	1,908,194	24,650,274	0 077411
2014	1,281,817	20,094,886	0 063788
2013	1,361,181	16,702,913	0 081494
2012	1,192,301	12,014,880	0 099235
2 Total of line 1, column (d)			0 337361
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			0 067472
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5			23,851,379
5 Multiply line 4 by line 3			1,609,300
6 Enter 1% of net investment income (1% of Part I, line 27b)			3,347
7 Add lines 5 and 6			1,612,647
8 Enter qualifying distributions from Part XII, line 4			1,532,829

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

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

Table with 11 rows for excise tax calculations. Includes categories like 'Exempt operating foundations', 'Domestic foundations', and 'Tax based on investment income'. Total amount owed is 12, and amount overpaid is 3,957.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Questions include 'Did the foundation attempt to influence any national, state, or local legislation?', 'Did it spend more than \$100 during the year for political purposes?', and 'Did the foundation have at least \$5,000 in assets at any time during the year?'.

Part VII-A Statements Regarding Activities (continued)

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions). 11 No
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) 12 No
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address HTTPS //WWW.KLA-TENCORFOUNDATION.ORG 13 Yes
14 The books are in care of CINDY CAMPBELL Telephone no (408) 875-5169

Located at ONE TECHNOLOGY DRIVE MILPITAS CA ZIP+4 95035

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here 15

16 At any time during calendar year 2017, 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 instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," enter the name of the foreign country 16 Yes No

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.

1a During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (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 the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). 1a Yes No
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here. 1b
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017? 1c No
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))
a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? If "Yes," list the years 20, 20, 20, 20 2a Yes No
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement-see instructions) 2b
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20, 20, 20, 20
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? 3a Yes No
b If "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 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 2017). 3b
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a No
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 2017? 4b No

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

5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<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 checked="" type="checkbox"/> Yes	<input 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	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here. ▶			5b
				No
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <i>If "Yes," attach the statement required by Regulations section 53.4945-5(d)</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
6a	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	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <i>If "Yes" to 6b, file Form 8870</i>			6b
				No
7a	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	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?			7b

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

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

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

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

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

Total number of other employees paid over \$50,000. **0**

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
NONE		

Total number of others receiving over \$50,000 for professional services. **0**

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 CENTER FOR ADVANCING WOMEN IN TECHNOLOGY - TECHNOLOGY PATHWAY INITIATIVE	320,000
2 HISPANIC FOUNDATION - FIVE SCHOLARSHIPS IN THE LATINOS IN TECHNOLOGY PROGRAM WHICH COVERS 3 YEARS	150,000
3 SAN JOSE PUBLIC LIBRARY - CHAMPIONSHIP SPONSORSHIP OF CODING PROGRAMS	100,000
4 YEAR UP INC - EDUCATIONAL INTERNSHIP PROGRAM	52,000

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
1	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	0

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	21,985,210
b	Average of monthly cash balances.	1b	2,229,388
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	24,214,598
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	24,214,598
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	363,219
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	23,851,379
6	Minimum investment return. Enter 5% of line 5.	6	1,192,569

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

1	Minimum investment return from Part X, line 6.	1	1,192,569
2a	Tax on investment income for 2017 from Part VI, line 5.	2a	6,694
b	Income tax for 2017 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	6,694
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	1,185,875
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	1,185,875
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	1,185,875

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	1,532,829
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	1,532,829
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	1,532,829

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 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				1,185,875
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only.			0	
b Total for prior years 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2017				
a From 2012.	400,142			
b From 2013.	526,158			
c From 2014.	277,500			
d From 2015.	679,431			
e From 2016.				
f Total of lines 3a through e.	1,883,231			
4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ <u>1,532,829</u>				
a Applied to 2016, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2017 distributable amount.				1,185,875
e Remaining amount distributed out of corpus	346,954			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))				0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,230,185			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).		0		
8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions).	400,142			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	1,830,043			
10 Analysis of line 9				
a Excess from 2013.	526,158			
b Excess from 2014.	277,500			
c Excess from 2015.	679,431			
d Excess from 2016.				
e Excess from 2017.	346,954			

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling. ▶

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

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

	Tax year	Prior 3 years			(e) Total
	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
b 85% of line 2a					
c 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					
e 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

a "Assets" alternative test—enter

(1) Value of all assets

(2) Value of assets qualifying under section 4942(j)(3)(B)(i)

b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .

c "Support" alternative test—enter

(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).

(3) Largest amount of support from an exempt organization

(4) Gross investment income

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

1 Information Regarding Foundation Managers:

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

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

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

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

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

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

c Any submission deadlines

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

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)				
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	1,500,413
b <i>Approved for future payment</i>				
Total			▶ 3b	0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Table with 5 main columns: (a) Business code, (b) Amount, (c) Exclusion code, (d) Amount, (e) Related or exempt function income. Rows include: 1 Program service revenue (a-f), 2 Membership dues and assessments, 3 Interest on savings and temporary cash investments, 4 Dividends and interest from securities, 5 Net rental income or (loss) from real estate (a-b), 6 Net rental income or (loss) from personal property, 7 Other investment income, 8 Gain or (loss) from sales of assets other than inventory, 9 Net income or (loss) from special events, 10 Gross profit or (loss) from sales of inventory, 11 Other revenue (a-e), 12 Subtotal, 13 Total.

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

Table with 2 columns: Line No. (with a downward arrow), and 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).

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

Part XVII

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

Table with Yes/No columns for questions 1a(1), 1a(2), 1b(1) through 1b(6), and 1c.

a Transfers from the reporting foundation to a noncharitable exempt organization of

- (1) Cash
(2) Other assets

b Other transactions

- (1) Sales of assets to a noncharitable exempt organization.
(2) Purchases of assets from a noncharitable exempt organization.
(3) Rental of facilities, equipment, or other assets.
(4) Reimbursement arrangements.
(5) Loans or loan guarantees.
(6) Performance of services or membership or fundraising solicitations.

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

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation.

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

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

b If "Yes," complete the following schedule

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

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here

2019-05-10

Signature of officer or trustee

Date

Title

May the IRS discuss this return with the preparer shown below (see instr)? Yes No

Paid Preparer Use Only

Table with fields: Print/Type preparer's name (SUE KENT), Preparer's Signature, Date, Check if self-employed, PTIN (P01302107), Firm's name (MARCUM LLP), Firm's EIN (11-1986323), Firm's address (111 WEST SAINT JOHN STREET SUITE 1010 SAN JOSE, CA 95113), Phone no (669) 232-9500.

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)
AMERICAN HONDA FINANCE CORP	P	2015-06-02	2017-12-11
AUSTRALIA AND NEW ZEALAND BANKING GROUP LTD (NEW Y	P	2015-06-03	2018-01-12
BANK OF MONTREAL	P	2015-06-16	2018-01-19
BANK OF NEW YORK MELLON CORP	P	2015-08-28	2018-01-19
BERKSHIRE HATHAWAY FINANCE CORP	P	2015-06-02	2018-01-12
CATERPILLAR FINANCIAL SERVICES CORP	P	2015-06-11	2018-06-16
CHEVRON CORP	P	2015-06-24	2018-03-02
WALT DISNEY CO	P	2015-06-02	2017-12-01
HSBC USA INC	P	2015-08-04	2018-05-29
HOME DEPOT INC	P	2015-09-08	2017-09-15

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
250,000		250,000	0
400,639		400,198	441
399,688		399,901	-213
300,793		299,891	902
400,000		400,000	0
400,000		400,000	0
260,000		260,000	0
250,000		250,000	0
200,351		200,000	351
400,000		400,000	0

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			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			0
			441
			-213
			902
			0
			0
			0
			0
			351
			0

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)
INTEL CORP	P	2015-06-04	2017-12-15
INTERNATIONAL BUSINESS MACHINES CORP	P	2015-06-02	2018-02-06
JOHNSON & JOHNSON	P	2015-08-26	2017-11-21
ELI LILLY AND CO	P	2015-06-18	2018-03-01
LLOYDS BANK PLC	P	2015-06-02	2018-01-19
MERCK & CO INC	P	2015-06-02	2018-05-18
ORACLE CORP	P	2017-03-20	2018-04-15
PHILIP MORRIS INTERNATIONAL INC	P	2015-08-04	2017-08-11
SANOFI SA	P	2015-06-02	2017-08-11
SOUTHERN CALIFORNIA GAS CO	P	2015-06-15	2018-06-15

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
400,000		400,000	0
400,000		400,000	0
300,000		300,000	0
400,000		400,000	0
400,238		400,013	225
250,000		250,000	0
500,000		500,000	0
400,000		400,000	0
399,432		399,861	-429
400,000		400,000	0

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			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			0
			0
			0
			0
			225
			0
			0
			-429
			0

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)
TOYOTA MOTOR CREDIT CORP	P	2017-06-05	2017-09-18
UNITED STATES TREASURY	P	2017-12-18	2018-01-18
UNITED STATES TREASURY	P	2018-03-13	2018-06-07
UNITED STATES TREASURY	P	2018-03-13	2018-06-14
UNITED STATES TREASURY	P	2015-10-28	2017-09-30
UNITED STATES TREASURY	P	2015-06-03	2017-12-08
UNITED STATES TREASURY	P	2015-06-24	2018-06-15
UNITED STATES TREASURY	P	2015-06-24	2018-06-15
UNITED STATES TREASURY	P	2015-07-30	2017-11-02
UNITED STATES TREASURY	P	2015-07-30	2017-07-13

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
500,045		500,272	-227
1,100,000		1,100,000	0
1,400,000		1,400,000	0
1,000,000		1,000,000	0
999,629		999,973	-344
998,281		999,790	-1,509
400,000		400,000	0
400,000		400,000	0
398,625		399,419	-794
399,922		399,985	-63

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			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-227
			0
			0
			0
			-344
			-1,509
			0
			0
			-794
			-63

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)
UNITED STATES TREASURY	P	2015-07-30	2017-07-13
WAL MART STORES INC	P	2015-06-01	2018-04-11

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
399,922		399,977	-55
250,000		250,000	0

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			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-55
			0

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
RICK WALLACE ONE TECHNOLOGY DRIVE MILPITAS, CA 95035	DIRECTOR 1 00	0	0	0
JOHN VAN CAMP ONE TECHNOLOGY DRIVE MILPITAS, CA 95035	BOARD CHAIRMAN 1 00	0	0	0
VINCE STAUB ONE TECHNOLOGY DRIVE MILPITAS, CA 95035	COMMITTEE PRESIDENT 5 00	0	0	0
CINDY CAMPBELL ONE TECHNOLOGY DRIVE MILPITAS, CA 95035	DIRECTOR 25 00	100,958	0	0
ELIZABETH HIRAI ONE TECHNOLOGY DRIVE MILPITAS, CA 95035	ADMINISTRATIVE ASSISTANT 10 00	15,555	0	0
TERRI LITTLE ONE TECHNOLOGY DRIVE MILPITAS, CA 95035	EXECUTIVE VP AND CHIEF LEGAL COUNSEL 1 00	0	0	0

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)				
a <i>Paid during the year</i>				
ALEXANDER ROSE ELEMENTARY SCHOOL 250 ROSWELL DR MILPITAS, CA 95035	NONE	501 (C) 3	ROBOTICS 3D ENHANCEMENTS	4,100
AMERICAN DIABETES ASSOCIATION 1 TECHNOLOGY DRIVE MILPITAS, CA 95035	NONE	501 (C) 3	TOUR DE CURE 2017/ VINCE STAUB REIMBURSEMENT OF 8 RIDERS	800
AMERICAN DIABETES ASSOCIATION 111 W ST JOHN STREET SUITE 1150 SAN JOSE, CA 95113	NONE	501 (C) 3	2017 SPONSORSHIP KT EMPLOYEE TOUR DE CURE	15,000
Total ► 3a				1,500,413

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)				
a <i>Paid during the year</i>				
AMERICAN DIABETES ASSOCIATION 2 PINE WEST PLAZA SUITE 204 ALBANY, NY 12205	NONE	501 (C) 3	TOUR DE CURE US FIELD-MALTA	6,000
AMERICAN DIABETES ASSOCIATION 5 PINE WEST PLAZA NEW YORK, NY 12205	NONE	501 (C) 3	US FIELD MALTA TOUR DE CURE	2,100
AMERICAN HEART ASSOCIATION 1 S ALMADEN BLVD SUITE 500 SAN JOSE, CA 95113	NONE	501 (C) 3	MATCHING FOR 2017 HEART WALK	12,705
Total ▶ 3a				1,500,413

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)				
a <i>Paid during the year</i>				
AMERICAN HEART ASSOCIATION HEART WALK 1 S ALMADEN BLVD SUITE 500 SAN JOSE, CA 95113	NONE	501 (C) 3	2017 SPONSORSHIP OF HEART WALK	25,000
AMERICAN HEART ASSOCIATION HEART WALK 10900-B STONELAKE BLVD STE 320 AUSTIN, TX 78759	NONE	501 (C) 3	2017 SPONSORSHIP OF HEART WALK OF SAMSUNG	2,000
AMERICAN RED CROSS 1663 MARKET ST SAN FRANCISCO, CA 94103	NONE	501 (C) 3	HURRICANE HARVEY	50,000
Total ▶ 3a				1,500,413

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)				
a <i>Paid during the year</i>				
AMERICAN RED CROSS 1663 MARKET ST SAN FRANCISCO, CA 94103	NONE	501 (C) 3	HURRICANE IRMA	25,000
AMERICAN RED CROSS 2025 E STREET NW WASHINGTON DC, DC 20006	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	2,860
AMERICARES 88 HAMILTON AVE STAMFORD, CT 06902	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	250
Total ▶ 3a				1,500,413

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)				
a <i>Paid during the year</i>				
ATX ROBOTICS INCHOWDY BOTS 6101 HARROGATE DR AUSTIN, TX 78759	NONE	501 (C) 3	ROBOTICS FOR HOMESCHOOLED	5,000
AUSTIN PETS ALIVE 1156 W CESAR CHAVEZ STREET AUSTIN, TX 78703	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	50
BATES COLLEGE2 ANDREWS ROAD LEWISTON, ME 04240	NONE	501 (C) 3	EMIKO HIGASHI BOARD MEMBER MATCHING	10,000
Total ▶ 3a				1,500,413


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)				
a <i>Paid during the year</i>				
BEST FRIEND ANIMAL SOCIETY 5001 ANGEL CANYON ROAD KANAB, UT 84741	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	50
BOISE STATE UNIVERSITY FOUNDATION 1910 UNIVERSITY DR BOISE, ID 83725	NONE	501 (C) 3	DANCE MARATHON	5,000
BOYS & GIRLS CLUB OF THE COATAL BEND 3902 GREENWOOD DRIVE CORPUS CHRISTI, TX 78416	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	20
Total ▶ 3a				1,500,413

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)				
a <i>Paid during the year</i>				
BRIGHT FUNDS INC 450 MISSION STREET 200 SAN FRANCISCO, CA 94105	NONE	PC	MATCHING GIFTS - STATEMENT	9,266
BRIGHT FUNDS INC 450 MISSION STREET 200 SAN FRANCISCO, CA 94105	NONE	PC	MATCHING GIFTS - STATEMENT 3733	6,915
BRIGHT FUNDS INC 450 MISSION STREET 200 SAN FRANCISCO, CA 94105	NONE	PC	EMPLOYEE DONATIONS WITH CREDITS	2,060
Total ▶ 3a				1,500,413

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)				
a <i>Paid during the year</i>				
BRIGHT FUNDS INC 450 MISSION STREET 200 SAN FRANCISCO, CA 94105	NONE	PC	MATCHING - STATEMENT 1536	275
BRIGHT FUNDS INC 450 MISSION STREET 200 SAN FRANCISCO, CA 94105	NONE	PC	EMPLOYER MATCHING	13,824
BRIGHT FUNDS INC 450 MISSION STREET 200 SAN FRANCISCO, CA 94105	NONE	PC	EMPLOYEE DONATIONS WITH CREDITS	1,150
Total 				1,500,413
3a				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BUDDIST TZU CHI FOUNDATION 2355 OAKLAND ROAD SAN JOSE, CA 95131	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	1,100
CATHOLIC CHARITIES OF GALVESTON- HOUSTON 2900 LOUISIANA ST HOUSTON, TX 77006	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	225
CENTER FOR ADVANCING WOMEN IN TECHNOLOGY 838 NORTH HILLVIEW MILPITAS, CA 95035	NONE	501 (C) 3	TECHNOLOGY PATHWAY INITIATIVE 3RD PAYMENT (OF 3, NEXT JUNE 30, 2017)	320,000
Total	3a ▶			1,500,413

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)				
a <i>Paid during the year</i>				
CENTER FOR DISASTER PHILANTHROPY 1201 CONNECTICUT AVE NW NO 300 WASHINGTON DC, DC 20036	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	50
CENTRE RESOURCES AIX EN PROVENCE 1140 RUE ANDRE AIX EN PROVENCE, AIX EN PROVENCE 13851 FR	NONE	501 (C) 3	HELPS FAMILIES WITH CANCER	3,334
CHAINS BROKEN 18911 N CHICORY LANE MORGAN HILL, CA 95037	NONE	501 (C) 3	BUILDING HEALTHY MINDS & BODIES	5,000
Total ▶				1,500,413
3a				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHINA SOONG CHING LING FOUNDATION 21ST SECOND DISTRIC ANZHEN XILI BEIJING, BEIJING CH	NONE	PC	LIVER TRANSPLANT FOR CHILDREN	32
CHINA SOONG CHING LING FOUNDATION NO 5 YUMIN DONGLU WEST DISTRICT BEIJING, BEIJING CH	NONE	PC	LIVER TRANSPLAT PROGRAM FOR CHILDREN	9,000
CHINA SOONG CHING LING FOUNDATION ROOM 1108 READ HOUSE NO 5 BEIJING, BEIJING CH	NONE	PC	LIVER TRANSPLANT PROGRAM FOR CHILDREN	9,000
Total ▶				1,500,413
3a				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COALITION FOR THE HOMELESS OF HOUSTON 600 JEFFERSON HOUSTON, TX 77002	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	20
COASTAL BEND COMMUNITY FOUNDATION 615 N UPPER BROADWAY 1950 CORPUS CHRISTI, TX 78401	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	20
COLUMBIA UNIVERSITY 630 WEST 168TH STREET NEW YORK, NY 10032	NONE	501 (C) 3	BOB CALDERONI BOARD MEMBER MATCHING	10,000
Total ▶ 3a				1,500,413

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)				
a <i>Paid during the year</i>				
CONVOY OF HOPE 330 SOUTH PATTERSON AVE SPRINGFIELD, MO 65802	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	200
DIRECT RELIEF 27 SOUTH LA PATERA LANE SANTA BARBARA, CA 93117	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	50
DONGTAN ARDIM WELFARE CENTER 33 YEOWOOL-RO 2 GIL HWASUNG CITY, GYEONGGI PRO 18427 KS	NONE	PC	CHILDREN'S DAY SPRING PICNIC	4,000
Total ▶ 3a				1,500,413


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)				
a <i>Paid during the year</i>				
FEEDING AMERICA 33 E WACKER DRIVE CHICAGO, IL 60601	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	150
FIRST ROBOTICS NY 200 BEDFORD STREET MANCHESTER, NH 03101	NONE	501 (C) 3	ROBOTIC COMPETITION IN NY - 1/ 3YEAR COMMITMENT	25,000
FOOD BANK OF CORPUS CHRISTI PO BOX 295 CORPUS CHRISTI, TX 78403	NONE	501 (C) 3	HURRICANE HARVEY	10,000
Total ▶ 3a				1,500,413

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)				
a <i>Paid during the year</i>				
FOOD BANK OF CORPUS CHRISTI 826 KRILL ST CORPUS CHRISTI, TX 78408	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	70
FOUNDATION FOR EXCELLENCE 1270 OAKMEAD PARKWAY SUITE 111 SUNNYVALE, CA 94085	NONE	501 (C) 3	SCHOLARSHIPS IN INDIA	10,000
GALVESTON COUNTY FOOD BANK 535 PORTWALL ST HOUSTON, TX 77029	NONE	501 (C) 3	HURRICANE HARVEY	10,000
Total ▶ 3a				1,500,413

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)				
a <i>Paid during the year</i>				
GALVESTON COUNTY FOOD BANK 1100 HERCULES AVE STE 200 HOUSTON, TX 77058	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	20
GALVESTON ISLAND MEALS ON WHEELS 2803 53RD STREET GALVESTON, TX 77551	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	20
GARDENER FAMILY HEALTH NETWORK 160 E VIRGINIA ST STE 100 SAN JOSE, CA 95112	NONE	501 (C) 3	GARDENER HOMELESS MOBILE UNIT	10,000
Total 				1,500,413
3a				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GREATER GOOD600 UNIVERSITY AVE SEATTLE, WA 98101	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	100
GREATER HOUSTON COMMUNITY FOUNDATION 5120 WOODWAY DR 6000 HOUSTON, TX 77056	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	120
GULF COAST HUMANE SOCIETY 3118 CABNISS PKWY CORPUS CHRISTI, TX 78413	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	20
Total ▶ 3a				1,500,413

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)				
a <i>Paid during the year</i>				
HABITAT FOR HUMANITY 2619 BROADWAY SUITE 205/206 OAKLAND, CA 94612	NONE	501 (C) 3	10 HOUSES FOR DAY OF SERICE	20,000
HABITAT FOR HUMANITY KOREA 195-7 DONGHO-RO JUNG-GU SEOUL, SEOUL 4598 KS	NONE	501 (C) 3	HOPE BUILD WITH KLA-TENCOR KOREA	13,000
HABITAT FOR HUMANITY NAPA 5130 FULTON DRIVE FAIRFIELD, CA 94534	NONE	501 (C) 3	2017 CALIF FIRE DISASTER RELIEF	15,000
Total ▶ 3a				1,500,413

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)				
a <i>Paid during the year</i>				
HACIENDA ELEMENTARY HIPS 1290 KIMBERLY DRIVE SAN JOSE, CA 95118	NONE	501 (C) 3	ROBOTICS CLUB	5,000
HARBOR LIGHT CHURCH 4760 THORTON AVE FREMONT, CA 94536	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	430
HARVEST EAST VALLEY 101 E COMSTOCK DR CHANDLER, AZ 85225	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	300
Total ▶ 3a				1,500,413

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)				
a <i>Paid during the year</i>				
HAZELDALE ELEMENTARY 650 NW 118TH AVE PORTLAND, OR 97229	NONE	501 (C) 3	STEM ROBOTICS	4,300
HILLSBORO ELK'S LODGE #1862 21865 NW QUATAMA ROAD HILLSBORO, OR 97124	NONE	501 (C) 3	EYE CLINC	1,000
HISPANIC FOUNDATION 1922 THE ALAMEDA AVE SAN JOSE, CA 95126	NONE	501 (C) 3	5 SCHOLARSHIPS IN THE LATINOS IN TECHNOLOGY PROGRAM - COVERS 3 YEARS	150,000
Total ▶ 3a				1,500,413

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)				
a <i>Paid during the year</i>				
HOPE RISING AGAIN 448 GOODYEAR STREET SAN JOSE, CA 95110	NONE	501 (C) 3	REFUGEE HELP & WELLNESS	2,500
HOUSTON DIAPER BANK 533 W 22ND ST HOUSTON, TX 77008	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	20
HOUSTON FOOD BANK 535 PORTWALL ST HOUSTON, TX 77029	NONE	501 (C) 3	HURRICANE HARVEY	10,000
Total ▶ 3a				1,500,413

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)				
a <i>Paid during the year</i>				
HOUSTON FOOD BANK 535 PORTWALL STREET HOUSTON, TX 77029	NONE	501 (C) 3	MATCHING FOR HURRICAN HARVEY	2,725
HOUSTON SPCA900 PORTWAY DRIVE HOUSTON, TX 77024	NONE	501 (C) 3	HURRICANE HARVEY	20,000
HOUSTON SPCA900 PORTWAY DRIVE HOUSTON, TX 77024	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	100
Total ▶ 3a				1,500,413

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)				
a <i>Paid during the year</i>				
HOUSTON SPCA900 PORTWAY DRIVE HOUSTON, TX 77024	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	1,770
ICHEON VOLUNTEER CENTER 31 NAMCHEON-RO ICHEON, ICHEON 17375 KS	NONE	501 (C) 3	SUPPORT COMMUNITY FOR WINTER WITH COATS & SUPPLIES	5,000
IMMIGRANT & REFUGEE COMMUNITY ORG 10301 NE GLISAN ST PORTLAND, OR 97220	NONE	501 (C) 3	SUPPORT OF IMMIGRANTS	1,000
Total ▶ 3a				1,500,413

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)				
a <i>Paid during the year</i>				
JK GROUP - KT MATCHING PROGRAM PO BOX 7174 PRINCETON, NJ 08543	NONE	PC	FY18Q1 MATCHING	64,792
JK GROUP EASY MATCHPO BOX 7174 PRINCETON, NJ 08543	NONE	PC	FY17Q3MG 11/4/2017	45,264
JK GROUP INC 650 COLLEGE ROAD EAST SUITE 4100 PRINCETON, NJ 08540	NONE	PC	FY17Q1MG	22,905
Total				1,500,413
3a				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JK GROUP INC 650 COLLEGE ROAD EAST SUITE 4100 PRINCETON, NJ 08540	NONE	PC	FY17Q2MG	8,400
MAITRI CHARITABLE TRUSTPO BOX697 SANTA CLARA, CA 95052	NONE	501 (C) 3	HELPING FAMILIES WITH DOMESTIC VIOLENCE	10,000
MILPITAS ELEMENTARY 1331 E CALAVERAS BLVD MILPITAS, CA 95035	NONE	501 (C) 3	SPONSORSHIP OF ELEMENTARY OLYMPICS	10,000
Total ▶ 3a				1,500,413

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)				
a <i>Paid during the year</i>				
MILPITAS POLICE ACTIVITIES LEAGUE 1275 N MILPITAS BLVD MILPITAS, CA 95035	NONE	501 (C) 3	RUGBY & GIANT ACTIVITIES	1,000
MISSION U-TOOPO BOX 2547 BASTROP, TX 78602	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	500
MOUNTAIN HOUSE HIGH SCHOOL 1090 S CENTRAL PKWY MOUNTAIN HOUSE, CA 95391	NONE	501 (C) 3	HEALTH EXPO AT MOUNTAIN HOUSE HIGH SCHOOL	1,000
Total ▶ 3a				1,500,413

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)				
a <i>Paid during the year</i>				
NARAEWUL33 YEOWOOL-RO 2 GIL SEOUL, SEOUL 18427 KS	NONE	PC	KIMCHI MAKING FOR LOW INCOME KOREANS	2,000
NATIONAL MULIPLE SCLEROSIS OREGON CHAPTER 2430 NW 206TH AVE HILLSBORO, OR 97006	NONE	501 (C) 3	GENERATE AWARENESS FOR MS	2,000
NISKAYUNA HIGH SCHOOL 55 VALLEYWOOD DRIVE GLENVILLE, NY 12302	NONE	501 (C) 3	ROBOTICS	3,000
Total ► 3a				1,500,413

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)				
a <i>Paid during the year</i>				
OFF THE MAT INTO THE WORLD 3435 OCEAN PARK BLVD SUITE 107-C SANTA MONICA, CA 90405	NONE	501 (C) 3	TRAINING INSTITUTION OF YOGA IN OAKLAND	10,000
ORANGE COUNTY OFFICE OF EDUCATION 200 KALMUS DRIVE COSTA MESA, CA 92626	NONE	501 (C) 3	ACADEMIC DECATHALON	5,000
PALO ALTO ROBOTICS ASSOC 2320 DARTMOUTH ST PALO ALTO, CA 94306	NONE	501 (C) 3	STEM ROBOTICS	1,500
Total ▶ 3a				1,500,413

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)				
a <i>Paid during the year</i>				
PIONEER HIGH SCHOOL ROBOTICS 1290 BLOSSOM HILL ROAD SAN JOSE, CA 95118	NONE	501 (C) 3	ROBOTICS CLUB	5,000
PORTLIGHT INCLUSIVE DISASTER RELIEF PO BOX 14109 CHARLESTON, SC 29422	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	120
PRESENTATION HIGH SCHOOL - ROBOTICS 2281 PLUMMER AVE SAN JOSE, CA 95125	NONE	501 (C) 3	VERSAIC GRANT REQ FOR ROBOTICS	5,000
Total ▶ 3a				1,500,413

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)				
a <i>Paid during the year</i>				
READING PARTNERS600B VALLEY WAY MILPITAS, CA 95035	NONE	501 (C) 3	LITERACY TUTORING FOR CHILDREN	5,000
READING PARTNERS600B VALLEY WAY MILPITAS, CA 95035	NONE	501 (C) 3	LITERACY TUTORING FOR CHILDREN	5,000
REDWOOD EMPIRE FOOD BANK 2990 BRICKWAY BLVD SANTA ROSA, CA 95403	NONE	501 (C) 3	2017 FIRE RELIEF	10,000
Total ▶ 3a				1,500,413

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)				
a <i>Paid during the year</i>				
RESOURCE AREA FOR TEACHERS 1355 RIDDER PARK DR SAN JOSE, CA 95131	NONE	501 (C) 3	DAY OF SERVICE KITS	6,000
RONALD MCDONALD HOUSE BOISE IDAHO CHAPTER 101 WARM SPRINGS AVE BOISE, ID 83712	NONE	501 (C) 3	SALES AWARD DISTRIBUTION, PRESENTED TO THE OFFICES FAVORITE CHARITY IN BOISE	5,000
SAN JOSE PUBLIC LIBRARY FOUNDATION PO BOX 611540 SAN JOSE, CA 95161	NONE	501 (C) 3	CHAMPION SPONSORSHIP OF CODING PROGRAMS	100,000
Total 3a				1,500,413

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)				
a <i>Paid during the year</i>				
SECOND HARVEST FOOD BANK 4001 N 1ST ST SAN JOSE, CA 95134	NONE	501 (C) 3	STAND UP FOR KIDS	10,000
SEMI FOUNDATION 3081 ZANKER ROAD MS 270 SAN JOSE, CA 95134	NONE	501 (C) 3	SEMICON SEMI HTU - SPONSORSHIP	10,000
SEMI FOUNDATION 673 S MILPITAS BLVD MILPITAS, CA 95035	NONE	501 (C) 3	SEMI HTU TAIWAN PROGRAM COST - INVOICE90-000016	22,000
Total ▶ 3a				1,500,413

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)				
a <i>Paid during the year</i>				
SEWA INTERNATIONAL INC 1712 HWY 6 S HOUSTON, TX 77077	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	151
SHAKAIFUKUSHI HOUJIN YOKOHAMASHI 1-1 SAKURAGI-CHO YOKOHAMASHI, KANAGAWA JA	NONE	PC	EDUCATION COURSE FOR ELEMENTARY SCHOOL	2,029
SHINMYEONG IMARU ORPHANAGE 26 GIBAERO 43 GIL HWASUNG CITY, GYEONGGI PRO 18454 KS	NONE	PC	PURCHASING SCHOOL UNIFORMS	6,000
Total ▶ 3a				1,500,413

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)				
a <i>Paid during the year</i>				
SHRINERS HOSPITALS FOR CHILDREN - PORTLAND 2900 N ROCKY POINT DRIVE TAMPA, FL 33607	NONE	501 (C) 3	SUPPORTING THE MISSION OF SHRINERS	1,000
SIANG TIAN ELEMENTARY SCHOOL NO 10-1 RULIN RD ERLIN TOWNSHIP, ERLIN TOWNSHIP CH	NONE	PC	CROSS INDUSTRY INFLUENCE, STEM EDUCATION	24,931
SILICON VALLEY BICYCLE COALITION PO BOX 1927 SAN JOSE, CA 95019	NONE	501 (C) 3	2017 ANNUAL DINNER & 2018 BIKE TO WORK DAY	25,000
Total ▶				1,500,413
3a				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SILICON VALLEY CENTER FOR ENTREPRENEURIAL DEVELOPMENT 25 N 14TH ST STE505 SAN JOSE, CA 95112	NONE	501 (C) 3	ENHANCE HISTORICAL SJ BUILDINGS	7,500
SILICON VALLEY EDUCATION FOUNDATION 1400 PARKMOOR AVE STE 200 SAN JOSE, CA 95126	NONE	501 (C) 3	HELPING FIRSTTECH CHALLENGE TEAM	1,000
SILICON VALLEY LEADERSHIP GROUP 2001 GATEWAY PLACE 101E SAN JOSE, CA 95110	NONE	501 (C) 3	2017 SANTA RUN SPONSORSHIP	12,000
Total 3a				1,500,413

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)				
a <i>Paid during the year</i>				
SILVER OAK ELEMENTARY 5655 SILVER CREEK VALLEY ROAD STE 116 SAN JOSE, CA 95138	NONE	501 (C) 3	STEAM LAG	10,000
SONOMA HUMANE SOCIETY 5345 HIGHWAY 12 WEST SANTA ROSA, CA 95407	NONE	501 (C) 3	2017 FIRE RELIEF	10,000
SOUTHERN ARIZONA RESEARCH (SARSEF) 4574 E BROADWAY BLVD TUCSON, AZ 85716	NONE	501 (C) 3	STEM DIVERSITY	4,000
Total 3a			▶	1,500,413

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)				
a <i>Paid during the year</i>				
ST BALRICKS FOUNDATION 1333 S MAYFLOWER AVE MONROVIA, CA 91016	NONE	501 (C) 3	SUNSET GROVE MC SHAVER	1,000
STEP UP SILICON VALLEY 2625 ZANKER ROAD SAN JOSE, CA 95134	NONE	501 (C) 3	WORKPLACE DIVERSITY	5,000
THE TECH MUSEUM OF INNOVATION 201 SOUTH MARKET STREET SAN JOSE, CA 95113	NONE	501 (C) 3	THE TECH CHALLENGE	10,000
Total 3a				1,500,413

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)				
a <i>Paid during the year</i>				
THE TECH MUSEUM OF INNOVATION 201 SOUTH MARKET STREET SAN JOSE, CA 95113	NONE	501 (C) 3	GIRLS @THE TECH	15,000
TOWER FOUNDATION OF SJSU 1 WASHINGTON SQUARE SAN JOSE, CA 95192	NONE	501 (C) 3	WOMEN ENGINEERING CONFERENCE MARCH 17,2018	10,000
TURNING WHEELS FOR KIDS 2400 MOORPARK AVE STE 207 SAN JOSE, CA 95128	NONE	501 (C) 3	BIKE TO WORK DAY	10,000
Total ▶ 3a				1,500,413

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)				
a <i>Paid during the year</i>				
UNITED WAY HOUSTON 50 WAUGH DRIVE HOUSTON, TX 77007	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	100
UNIVERSITY OF SHEFFIELD IN AMERICA INC PO BOX 9564 SEATTLE, WA 98145	NONE	501 (C) 3	DICKERSON BOARD MEMBER MATCH	7,500
WAKE THE WORLD3434 NE HAYES ST CAMAS, WA 98607	NONE	501 (C) 3	FOSTER FAMILIES PICNIC	1,000
Total ▶				1,500,413
3a				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WORLD VISION INC PO BOX 9716 MS415 FEDERAL WAY, WA 98063	NONE	501 (C) 3	DAY OF SERVICE KITS	5,120
WORLD VISION INTERNATIONAL 800 WEST CHESTNUT AVE MONROVIA, CA 91016	NONE	501 (C) 3	HURRICANE HARVEY & IRMA TRIPLE MATCH	1,500
WORLD VISIONINC PO BOX 9716 MAIL STOP 443 FEDERAL WAY, WA 98063	NONE	PC	HURRICANE IRMA DISASTER RELIEF	25,000
Total ▶ 3a				1,500,413

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)				
a <i>Paid during the year</i>				
YEAR UP INC45 MILK STREET BOSTON, MA 02109	NONE	501 (C) 3	EDUCATIONAL INTERNSHIP PROGRAM	52,000
YEONGBO SOCIAL WELFARE FOUNDATION 323 BUCHEON-RO SEOUL, SEOUL KS	NONE	PC	BOOK READING FOR SENIORS	4,000
Total 3a				1,500,413

TY 2017 Investments Corporate Stock Schedule**Name:** KLA-TENCOR FOUNDATION**EIN:** 77-0557004

Name of Stock	End of Year Book Value	End of Year Fair Market Value
NORTHERN TRUST SECURITIES	12,307,465	12,255,337

TY 2017 Investments Government Obligations Schedule**Name:** KLA-TENCOR FOUNDATION**EIN:** 77-0557004**US Government Securities - End
of Year Book Value:**

10,390,682

**US Government Securities - End
of Year Fair Market Value:**

10,319,931

**State & Local Government
Securities - End of Year Book
Value:**

0

**State & Local Government
Securities - End of Year Fair
Market Value:**

0

TY 2017 Other Decreases Schedule**Name:** KLA-TENCOR FOUNDATION**EIN:** 77-0557004

Description	Amount
UNREALIZED LOSS	75,575

TY 2017 Other Expenses Schedule**Name:** KLA-TENCOR FOUNDATION**EIN:** 77-0557004**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OTHER EXPENSES	47,068	16,338	0	30,730
EMPLOYER LIABILITY INSURANCE	57	0	0	57
SERVICE FEES	1,629	0	0	1,629

TY 2017 Other Income Schedule**Name:** KLA-TENCOR FOUNDATION**EIN:** 77-0557004**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
CUSTODIAL ACCRETION	6,068	6,068	

TY 2017 Other Increases Schedule**Name:** KLA-TENCOR FOUNDATION**EIN:** 77-0557004

Description	Amount
PRIOR PERIOD ADJUSTMENT	16,146

TY 2017 Other Liabilities Schedule**Name:** KLA-TENCOR FOUNDATION**EIN:** 77-0557004

Description	Beginning of Year - Book Value	End of Year - Book Value
EXCISE TAX PAYABLE	4,500	0

TY 2017 Taxes Schedule**Name:** KLA-TENCOR FOUNDATION**EIN:** 77-0557004

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAXES	9,273	0	0	0
OTHER FEES AND TAXES	50	0	0	0

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

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

OMB No 1545-0047
2017

Name of the organization
KLA-TENCOR FOUNDATION

Employer identification number
77-0557004

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

- 501(c)() (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other 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 33¹ 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 totaling \$5,000 or more during the year ▶ \$ _____

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 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)

Name of organization KLA-TENCOR FOUNDATION	Employer identification number 77-0557004
--	---

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	KLA-TENCOR CORPORATION ONE TECHNOLOGY DRIVE MILPITAS, CA95035	\$ 3,998,685	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)

Name of organization KLA-TENCOR FOUNDATION	Employer identification number 77-0557004
--	---

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____

Name of organization KLA-TENCOR FOUNDATION	Employer identification number 77-0557004
--	---

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

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
<hr/> <hr/>	<hr/> <hr/>

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
<hr/> <hr/>	<hr/> <hr/>

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
<hr/> <hr/>	<hr/> <hr/>

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
<hr/> <hr/>	<hr/> <hr/>