2019

Department of the Treasury Internal Revenue Service

Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation 1912 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.

Open to Public Inspection

For c	alenda	r year 2019 or tax	x year beginni	ng	, 2019	, and ending		,		•	
		L. STAGNARO			BLE TRUST		A	Employer identificati 84-3183404	1		
		OOKSIDE ROA N, CA 95219		.41			В	Telephone number (s (209) 938-			
			=1			ĭ	С	If exemption applica	aon is	pending, check here.	► X
G C	neck a	II that apply	Initial return Final return		Initial return of a form Amended return	ner public charity	D	1 Foreign organization		•	
H C	neck tv	/pe of organizatio	Address cha	<u> </u>	Name change 1(c)(3) exempt private t	foundation of	-	2 Foreign organization here and attach com	s meet putatio	ang the 85% test, che on	^{ck} □
	Se	ction 4947(a)(1) i	nonexempt cha	arıtable	trust Other taxable	private foundation	E	If private foundation under section 507(b)			▶ □
(fr	om Part	et value of all assets a	6) ´		Other (specify)		F	If the foundation is i	n a 60	-month termination	
P	-	27,401,		Part I,	column (d), must be on	cash basis)	<u> </u>	under section 507(b)	(1)(B)	i, check here	<u> </u>
¦£ar	E	nalysis of Rev xpenses (The to blumns (b), (c), and ecessarily equal to blumn (a) (see insti	total of amoun nd (d) may not he amounts in	t	(a) Revenue and expenses per books	(b) Net investme income	nt	(c) Adjusted no income	∍t	(d) Disburseme for charitable purposes (cash basis or	le
	1	Contributions, gifts, grants,		:hedule)	27,425,346.	808888918\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	en a	75943-97 3 5 7 5 6 7 6	K: W	X1200000	
	2	Check ►	idation is not required to	attach Sch E	LOS DE LA PROPERTIDA DE						* (%)**
ı	_			_	0.755					AV.372.638	30101
	3 4	Interest on savings and ten Dividends and interes		S	8,760.	8,76				NAC AND ADDRESS	
2		3 Gross rents	st irom securities		228,325.	228,32	<u> 25.</u>	228,3	<u> 25.</u>	9947 2 (2 (2 (2 (2 (2 (2 (2 (2 (2	**************************************
2022	1 -	Net rental income				 \$85-6-888802F-77.0003C0X	CHKKK	 7506879542075-54769848	erati.	2004 Serve 220 Care	an la constant Par constantes
	6	or (loss) 3 Net gain or (loss) from sale	le of assets not on line 10	n	-265.			\$6.00 (\$2.50 \text{2.000}	<u>65800</u>	CANAL SECTIONS	SCAT 2
JAN 28 evenue		Gross sales price for		-		4/3 # HA () () () ()	2	Valoria de la compansión de la compansió	######################################	28450V 4734385	2535 7 AN
JAN Z Revenue	7	assets on line 6a Capital gain net incoi	me (from Part IV. li	ne 2)	32.235.535.555.555.555.555.555.555.555.5	Patrician described as to the second	Sec. 1843	State Control of the State Con	200 AV	ACUS ACCUSANCE OF THE PROPERTY	eneral Eneral
₹ ₹	8	Net short term capita	· •••		2001 - 200 January - 200 Janua			8 885294 6 0 X 7 2 4 2 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	SAN-SHILL SAN	3472393P65094	22/2/
& 	9	Income modifications	, O		700 C		5.200			7.7.7.7.7.	950.0
} · _	10	Gross sales less returns and allowances .							Jar.		
		b Less Cost of goods sold					N./.	MORESERVE			17.45
		Gross profit or (loss) (attai	ch schedule)		and a first Transfers of a control of the action			\$ \$	M. S. M.	ARCTERE	
	11	Other income (attach	schedule)			1 Jan 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	944.334.4V				
	12	Total, Add lines 1 thr	rough 11		27,662,166.	237,08	0.5	237,0	<u> </u>		CALCARA CALCAR
	13			tees etc	21,002,100.	231,08	55.	231,0	<u>55.</u>		MOTE CARCO
X	14	Other employee salar		1000, 010							
xpenses	15	Pension plans emplo	=					-			
Ţ	16	a Legal fees (attach sc	hedule)								
		Accounting fees (atta	ach sch)					RECE	175	LU	
Ш	,	Other professional fees (a	ttach sch)		***************************************					18	
<u>Š</u> .	17	Interest						MOV 2	<u>n</u> 2	han O	
<u>र्</u> च	18	Taxes (attach schedule)(se	e instrs)					101 101 #	U L	S	
<u>is</u>	19	Depreciation (attach									32.18
.⊑	20	schedule) and deplet Occupancy	lion			,		H OGDE	N,	UTOX	KERIDIK
듐	21	Travel, conferences,	and meetings					<u> </u>	<u> </u>		
ď	22	Printing and publicati	=		' 						
걸	23	Other expenses (atta				-		-			
a											,
.⊑'	24							-		_	
Operating and Administrative	٠,	expenses Add lines	ת גת "	VX T		100 You Management to the Control of the Control	4 400 200	2 * 1940Y0 3Y1, 3 490 H odu 800	orovates nat		
Φ	25	Contributions, gifts, grants	F	(1 AV	260,000.		S		Mick?	260,0	<u> </u>
ō	26	Add lines 24 and 25			260,000.	THE COMMUNICATION OF THE PARTY	0.	A AAACAAAAAA, AL Waxaare	0.	260,0	000.
	27	Subtract line 26 from Excess of revenue o						4			1
	'	and disbursements	ver expenses		27,402,166.						
		Net investment inco	me (if negative, ent	er -0-)	TAN STRANGE BY THE STATE OF THE	237,08	35.		335		
	- 1	C Adjusted net income	· -			War Street	99000	237,0	85.		

Pär	t511 2	Balance Sheets	Attached schedules and amounts in the description column should be for end of year amounts only	Beginning of year			of year
'î śĠi!	ržii 9	Dajanec Oncets	(See instructions)	(a) Book Value	(b) Book Valu	е	(c) Fair Market Value
	1	Cash - non-interest	-bearing '		2,343,8	63.	2,343,863.
	`2	Savings and tempora	ary cash investments.		25,054,8		25,054,878.
	3	Accounts receivable	.	tr dani " " (indinggalita () dalam di		W. 2514	
		Less allowance for	doubtful accounts ►	ENGLISH DAY DAY BENNISHWANDER BLEETER	. NEOTTO PROCESSES AND	and about h	Autoritation Control C
	4	Pledges receivable	•		- 100		
	'	Less allowance for	doubtful accounts ►	APAGNINA CIMENANDATIONAL IN	<u> </u>	838 T 394 Feb.	Market County Co. The Through Co.
	5	Grants receivable					
	_		and dispators trustees and other				
	6	disqualified persons (attac	ers, directors, trustees, and other ch schedule) (see instructions)			7. Mari fe	
	7	Other notes and loans reco	eivable (attach sch)				
		Less allowance for o	doubtful accounts 🟲				
	8	Inventories for sale of	or use				
	9	Prepaid expenses ar	nd deferred charges				
Assets	10 a	Investments – US obligations (attach s	and state government chedule)				
SS	/ E		stock (attach schedule) STATEMENT 1		3,4	25	3,083.
Ř	1	: Investments — corporate				<u> </u>	3,003.
		Investments – land,	,	(1) 1/2 (2) (2) (2) (2) (2) (2) (2) (2) (2) (2	2657, 7-495385 22.	X***385	
	''	equipment basis	•				
		Less accumulated deprect (attach schedule)	ation				
	12	Investments – morto	gage loans				
	13	Investments - other	(attach schedule)	i			
	14	Land, buildings, and	equipment basis►	5000	H. (171)		教会学会通常
		Less accumulated depreci (attach schedule)	ation	de days & Address William 14 No.	THE CAN PROPERTY OF THE PARTY OF THE CAN	NAME OF THE PARTY	The state of the s
	15	Other assets (descri	be •				
	16	Total assets (to be of see the instructions	completed by all filers — Also, see page 1, item I)	0.	27,402,1	66.	27,401,824.
	17	Accounts payable ar	nd accrued expenses		· · · · · · · · · · · · · · · · · · ·		我,你在二份表演就看到
	18	Grants payable	·				KOLSK DERVI
S)	19	Deferred revenue					
ţį	20		tors, trustees, & other disqualified persons				
ij	21		s payable (attach schedule)				
Liabilities	22	Other liabilities (desc			- ·		800 1 4 00 10 00 00 00 00 00 00 00 00 00 00 00
		Other habilities (desi					STATE OF THE STATE
	23	Total liabilities (add	<u> </u>	0.		0.	
8		and complete lines 2	llow FASB ASC 958, check here ►				
Net Assets or Fund Balanco	24	Net assets without d					
Ba							
₽	25	Net assets with dono	or restrictions				
בָּ			not follow FASB ASC 958, check here				
P	26	and complete lines 2	26 through 30. orincipal, or current funds		27,402,1	66	
र्श	27	· · · · · · · · · · · · · · · · · · ·	or land, bldg , and equipment fund		21,402,1	<u>00.</u>	AND AND STREET
Š	28		ulated income, endowment, or other funds				124 A. M. A. M. A. C.
Ą	1				27 402 1		Parker of the Control
Net Set	29 30	Total liabilities and i	und balances (see instructions) net assets/fund balances	0.	27,402,1		
D 22	- SEE E A SE	(see instructions)	:- !- N-4 A1 F1 D-1	0.	27,402,1	<u>66.</u>	
ŗŗaŗ		-	ges in Net Assets or Fund Balanc		Т		<u> </u>
1	Total end-	net assets or fund ba of-year figure reported	alances at beginning of year – Part II, colu d on prior year's return)	ımn (a), line 29 (must a	gree with	1	0.
2	Ente	r amount from Part I,	line 27a			2	27,402,166.
3	Other	increases not included in li	ne 2 (ıtemize) ►	•		3	
4	Add I	lines 1, 2, and 3				4	27,402,166.
5	Decrea	ases not included in line 2 (itemize) ►		ļ	5	, ,
6	Total	net assets or fund ba	alances at end of year (line 4 minus line 5)) – Part II, column (b), i	Ine 29	6	27,402,166.

` (a) List and describe	e the kind(s) of property sold (for examp warehouse, or common stock, 200 sh	le, real estate,	(b) How acquired P — Purchase D — Donation	(C) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a N/A					
b					
С					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa		(h) Gain or ((e) plus (f) m	
a					
b		.			
<u>C</u>	-				
d	1				
Complete only for accets about	and the second second by the	formed above and 10/01/00			
· · · · · · · · · · · · · · · · · · ·	ng gain in column (h) and owned by the			(I) Gains (Col ain minus col (k), b	
(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		an -0-) or Losses (fi	
a .					
b		· · · · · · · · · · · · · · · · · · ·			
<u> </u>					
d					
e					
2 Capital gain net income or (n		enter in Part I, line 7 er -0- in Part I, line 7			
3 Net short-term capital gain of	r (loss) as defined in sections 1222(5) and (6)			
If gain, also enter in Part I, Ii in Part I, line 8	ne 8, column (c) See instructions If	(loss), enter -0-	- 3		
Rart V Qualification Unde	er Section 4940(e) for Reduce	d Tax on Net Investm	ent Income	-h	
If section 4940(d)(2) applies, leave	foundations subject to the section 4940 this part blank ection 4942 tax on the distributable a		·	N/A ∏Yes	∏No
If 'Yes,' the foundation doesn't qua	alify under section 4940(e). Do not con	mplete this part			
1 Enter the appropriate amount in	n each column for each year, see the ins	structions 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 as	sets	(d) Distributior (col (b) divided	
2018					
2017					
2016					
2015					
2014					
O T-1-1-(11(1)					
2 Total of line 1, column (d)	_		2	1	
	e 5-year base period — divide the total of on has been in existence if less than		3		
4 Enter the net value of noncha	aritable-use assets for 2019 from Pari	t X, line 5	4		
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		
8 Enter qualifying distributions	from Part XII, line 4		8		
If line 8 is equal to or greater the Part VI instructions	nan line 7, check the box in Part VI, line	1b, and complete that part of	using a 1% tax ra	ate See the	

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se	e inst	ructio	ns)	
1 a	Exempt operating foundations described in section 4940(d)(2), check here	# 'X		Section 1	人的原理
	Date of ruling or determination letter (attach copy of letter if necessary – see instructions)	-			
b	Domestic foundations that meet the section 4940(e) requirements in Part V,	1		4	.742.
_	check here. ► ☐ and enter 1% of Part I, line 27b	经验	& 30° 18	- 	317 (4238)
_	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)	33			
·					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable	2			0
_	foundations only, others, enter -0-) Add lines 1 and 2	3		4	7.40
3		ļ		- 4	<u>,742.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4	_		0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5	80 NANDASN	4	,742.
6	Credits/Payments				
	2019 estimated tax pymts and 2018 overpayment credited to 2019 6 a				1, 11, 11, 11, 11
b	Exempt foreign organizations — tax withheld at source 6 b				
С	Tax paid with application for extension of time to file (Form 8868)				7 XV 6
d	Backup withholding erroneously withheld 6 d				
7	Total credits and payments Add lines 6a through 6d	7			0.
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	8			98.
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed SEE STATEMENT 2	▶ 9	1	4	,840.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			
11	Enter the amount of line 10 to be Credited to 2020 estimated tax Refunded	11			
Par	VII-A Statements Regarding Activities			· -	<u>. </u>
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Υe	s No
	participate or intervene in any political campaign?			1 a	X
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes?				
	See the instructions for the definition			1 b	x
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published			78 77 73 5	K (2)34
	or distributed by the foundation in connection with the activities				
	Did the foundation file Form 1120-POL for this year?			1 c	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			355	x 12 6 3
	(1) On the foundation ►\$ 0. (2) On foundation managers ►\$		0.	1334	
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	X X
_	If 'Yes,' attach a detailed description of the activities				A 10.5338
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
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4 a	$\frac{1}{X}$
	If 'Yes,' has it filed a tax return on Form 990-T for this year?			4 b	N/A
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5	
•	If 'Yes,' attach the statement required by General Instruction T			2 10 100	252 12 See 4
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
J	By language in the governing instrument, or				
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 			6	X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col (c), and Part XV				X A
	Enter the states to which the foundation reports or with which it is registered. See instructions			3595 87X	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
va	CA				
b	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ² If 'No,' attach explanation			8b >	X
_			107275	95-C-538A 3 355	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) of for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If 'Yes,' complete	e Par	たい(さ) t XIV	9	X
		-			<u> </u>
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses			10	X
BAA	· ·		F	orm 990-PF	

ща	TAVIFA: Statements Regarding Activities (continued)	Take to the C		
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	Yes	No X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement See instructions.	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► <u>N/A</u>			
14	The books are in care of ► MARK_CROCE Telephone no ► 209 9	<u>38-1</u> (010_	
	Located at > 3520 BROOKSIDE ROAD SUITE 141 STOCKTON CA ZIP + 4 > 95219	N/A		<u> </u>
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	M/ A		∐ NI / N
			Yes	N/A No
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	1.C3	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country			
Pa	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
1	a 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? Yes X No		1. 18	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No		27:53 - 43	
	(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)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) Yes X 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	1 Ь	, ``,	<u> </u>
	Organizations relying on a current notice regarding disaster assistance, check here		300	
	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,	1.		
	that were not corrected before the first day of the tax year beginning in 2019?	1 c	Jan Carl	X 3833
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 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019? Yes X No			
	If 'Yes,' list the years ► 20 _ , 20 _ , 20 , 20			
	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)	2 b	N.	/A
	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		K	
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No			
	b If 'Yes,' did it have excess business holdings in 2019 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 Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019)	3 b	N	/ A
		30	IN	
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a	#5090x486	X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4 b		X
BAA	A Fr	orm 990	PF (2019)

Part VII-B Statements Regarding Activit	ies for Which Form	4720 May Be Req	uired (co	ntinue	d)			_
5 a During the year, did the foundation pay or incur a			•			-\$\langle_{\text{S}}\cdot	Yes No	-
(1) Carry on propaganda, or otherwise attempt	ot to influence legislatio	n (section 4945(e))?		Yes	X	lo 💮		15 (C.) X
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	ilic election (see section ation drive?	1 4955), or to carry		Yes		lo 👸		STATE OF THE PARTY
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?		Yes	X N	lo [新花]		Š
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? See instructions	a charitable, etc , organi	zation described		Yes	XN	lo 🏥		186 187
(5) Provide for any purpose other than religio educational purposes, or for the preventio				Yes	XN	lo		SAN A
b If any answer is 'Yes' to 5a(1)—(5), did any of described in Regulations section 53 4945 or in a case instructions	f the transactions fail to current notice regarding d	qualify under the exceptisaster assistance?	ptions	_	_	5 b	N/A	of the
Organizations relying on a current notice rega	irding disaster assistanc	ce, check here		•		\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		500
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	sibility for the grant?		N/A	Yes		10		N 122 4
If 'Yes,' attach the statement required by Regi	ulations section 53 4945	o-5(d)						14
6 a Did the foundation, during the year, receive an on a personal benefit contract?				Yes	XN	<u> </u>		SCHOOL STATE
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indirec	tly, on a personal bene	fit contract	7		6 b	X X	8
7a At any time during the tax year, was the found	dation a party to a proh	ibited tax shelter transa	action?	Yes	XN	lo 🔉 ,		
b If 'Yes,' did the foundation receive any procee	-			2	_N	/A 7b		_
8 Is the foundation subject to the section 4960 tax of	on payment(s) of more that	an \$1,000,000 in remune	ration	—. .	ולא	8	18 1	
or excess parachute payment(s) during the ye	ear ⁹			Yes	ΧN	lo 🔯	Me.	2
Part VIII Information About Officers, Dand Contractors	irectors, Trustees,	Foundation Manag	gers, Hig	hly Pa	id Er	nployee	s,	
1 List all officers, directors, trustees, and found	dation managers and th	neir compensation. See	instructio	ns.				_
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	plans a	ibutions yee bene nd defer ensation	efit red		se account illowances	
MARK CROCE 3520 BROOKSIDE ROAD SUITE 141 STOCKTON, CA 95219	TRUSTEE 1.00	0.	·		0.		0	•
			,					
								_
2 Compensation of five highest-paid employees (or		on line 1 – see instructio	ns). If none (d)Contr	, enter 'N	ONE!			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	emplo	ee bene nd defer ensation	efit	(e) Expens other a	se account illowances	,
NONE		<u></u>		J. 13411011				-
				_				
					_			_
	\$							_
	,							
							-	-
	'							
Total number of other employees paid over \$50,000	3		-		▶			_

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Form 990-PF (2019) ANGELO L. STAGNARO 2017 CHARITABLE TRUST 84-318 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Early and Contractors (continued)	
3 Five highest-paid independent contractors for professional services. See instructions. If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
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 PROVIDED SUPPORT TO THE DIOCESE OF STOCKTON CATHOLIC ELEMENTARY SCHOOLS IN ORDER TO PROVIDE SCHOLARSHIPS FOR EDUCATIONAL PURPOSES.	260,000.
2	
3	
4	
Part IV B Cummon, of Browner Bolated Investments (see instructions)	
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
	Amount
1 N/A	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	<u> </u>
BAA	Form 990-PF (2019)

	4-3183	
Part X Minimum Investment Return (All domestic foundations must complete this part Fosee instructions.)	oreign f	oundations,
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	1 a	2,900.
b Average of monthly cash balances.	1 b	6,871,776.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	6,874,676.
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	6,874,676.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	103,120.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	6,771,556.
6 Minimum investment return. Enter 5% of line 5	6	338,578.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private opera and certain foreign organizations, check here ☐ and do not complete this part.)	ating fo	undations
1 Minimum investment return from Part X, line 6	1	338,578.
2a Tax on investment income for 2019 from Part VI, line 5	.]	
b Income tax for 2019 (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2 c	4,742.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	333,836.
4 Recoveries of amounts treated as qualifying distributions.	4	
5 Add lines 3 and 4	5	333,836.
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	333,836.
Part XII Qualifying Distributions (see instructions)		
 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26 	1 a	260,000.
b Program-related investments — total from Part IX-B	1 b	
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)	3 a	
b Cash distribution test (attach the required schedule)	3 b	,
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	260,000.

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4

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Form **990-PF** (2019)

260,000.

5

6

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				222 026
2 Undistributed income, if any, as of the end of 2019	 			333,836.
a Enter amount for 2018 only			0.	
b Total for prior years 20 , 20 , 20		0.		
3 Excess distributions carryover, if any, to 2019				
a From 2014		, ,	MA Y	
b From 2015.	That has been a second	hata a shifteredinda ter a ca estalillar ser ishililih		gis size '' "E
c f rom 2016	***	**	. 4 4 4 5 2	
d From 2017				
e From 2018				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2019 from Part				
XII, line 4 ► \$ 260,000.				
a Applied to 2018, but not more than line 2a			0.	
 Applied to undistributed income of prior year (Election required — see instructions) 	irs	0.		
c Treated as distributions out of corpus			TTTTT vestadotessammaestahasasammeammamminin	unconstilled 4 bilde out unit i 20 me - c i - c i
(Election required - see instructions)	0.			
d Applied to 2019 distributable amount				260,000.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a)	0.			0.
6 Enter the net total of each column as	´			
indicated below:				
a Corpus, Add lines 3f, 4c, and 4e. Subtract line 5	0.	, ,		
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut	ed	ļ · ·		
income for which a notice of deficiency has				×.
been issued, or on which the section 4942(tax has been previously assessed	"	0.		-
d Subtract line 6c from line 6b Taxable				
amount — see instructions		0.		
e Undistributed income for 2018 Subtract line 4a from				
line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2019 Subtract line	es			
4d and 5 from line 1. This amount must be distributed in 2020.				72 026
7 Amounts treated as distributions out of		-		73,836.
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 2014 no			<u> </u>	
applied on line 5 or line 7 (see instructions	0.			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9		277 277		V .v .v .
a Excess from 2015		*** ***		, ,,
b Excess from 2016				
c Excess from 2017				
d Ercess from 2018	u da kannigo horumbo kanakalini ja kadakalini ka kandundara	CONTRACTOR OF THE PROPERTY OF	Januara Moheberara III	នាស៊ីម៉ែលវិសាល់លើក្រុងប្រែកស្តារ៉ូក្នុង 🖰 🐪 🐧
e Excess from 2019				
BAA				Form 990-PF (2019)

Form 990 PF (2019) ANGELO L. STAGNA				84-318340	
Part XIV Private Operating Foundat					N/A
1 a If the foundation has received a ruling or dete is effective for 2019, enter the date of the	ruling			e ruling 4942(j)(3) or	4942(j)(5)
b Check box to indicate whether the foundat		rating foundation of		<u> </u>	1 4942()(3)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	4 > 2010	Prior 3 years	40016	(e) Total
investment return from Part X for	(a) 2019	(b) 2018	(c) 2017	(d) /2016	
each year listed	_				
b 85% of line 2a				/	
 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			, or distillance		
(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	foundation had	\$5,000 or more	in
assets at any time during th	e year – see in	structions.)			
Information Regarding Foundation Managers of the foundation who have close of any tax year (but only if they have NONE	e contributed more th	nan 2% of the total co than \$5,000) (See	ontributions received l section 507(d)(2))	by the foundation bef	ore the
b List any managers of the foundation who own a partnership or other entity) of which the NONE	10% or more of the foundation has a 1	stock of a corporatio 0% or greater intere	n (or an equally large est	portion of the owner	rship of
2 Information Regarding Contribution, Grant, Check here ► X if the foundation only marequests for funds. If the foundation make 2a, b, c, and d. See instructions	kes contributions to	preselected charitable			
a The name, address, and telephone number of	r email address of the	e person to whom ap	plications should be a	addressed	
					<u> </u>
b The form in which applications should be :	submitted and infor	mation and materia	ils they should inclu	de	
c Any submission deadlines				_	
d Any restrictions or limitations on awards,	such as by geograp	hical areas, charital	ble fields, kinds of i	nstitutions, or other	factors
,	, 5 - 5 - 1	,	, ,	,	
		**			

Page 11

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient show any relationship to any foundation manager Purpose of grant or contribution Amount status of recipient Name and address (home or business) or substantial contributor a Paid during the year ST GEORGE PARISH SCHOOL NONE EOF EDUCATIONAL 260,000. ASSISTANCE 144 W 5TH STREET STOCKTON CA 95206 ► 3a 260,000. Total b Approved for future payment ► 3b Total

Enter gross	s amounts unless otherwise indicated	Unrelate	ed business income	Exclude	d by section 512, 513, or 514	(e)
1 Progr	ram service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions)
a	an service revenue		_	code		
ь b						
c						_
g						
e						
·	_					
- Eass	and contracts from government agencies	 	·			
-						
	bership dues and assessments					
	st on savings and temporary cash investments		-	14		
	ends and interest from securities	5 7303 % 190	COMPANY CAMPAGES STATE COMPANY COMPANY	14		Contraction of the last of the
	ental income or (loss) from real estate	なる。	n) man a similari m	13.752		And William Control of the Market
	financed property					
	lebt-financed property					
	ntal income or (loss) from personal property					
	r investment income				<u> </u>	
_	r (loss) from sales of assets other than inventory			18	-265.	
	ncome or (loss) from special events					
10 Gross	s profit or (loss) from sales of inventory					
11 Other	r revenue				3.	
a						
b						
c						
d						·
e					-	
12 Subto	otal Add columns (b), (d), and (e)	74 Y 1 82		273.53	236,820.	
			1			
	. Add line 12, columns (b), (d), and (e)			1.4	13	236,820.
13 Total			12111111	144 4 20		236,820.
13 Total (See works	. Add line 12, columns (b), (d), and (e)	ions)			13	236,820.
13 Total (See works	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat	ions) e Accompl	ishment of Exemp	t Purp	oses A contributed important	tly to the
13 Total (See works Part XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat Relationship of Activities to the Explain below how each activity for which	ions) e Accompl	ishment of Exemp	t Purp	oses A contributed important	tly to the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat Relationship of Activities to the Explain below how each activity for which	ions) e Accompl	ishment of Exemp	t Purp	oses A contributed important	tly to the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat Relationship of Activities to the Explain below how each activity for which	ions) e Accompl	ishment of Exemp	t Purp	oses A contributed important	tly to the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat Relationship of Activities to the Explain below how each activity for which	ions) e Accompl	ishment of Exemp	t Purp	oses A contributed important	tly to the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat Relationship of Activities to the Explain below how each activity for which	ions) e Accompl	ishment of Exemp	t Purp	oses A contributed important	tly to the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat Relationship of Activities to the Explain below how each activity for which	ions) e Accompl	ishment of Exemp	t Purp	oses A contributed important	tly to the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat Relationship of Activities to the Explain below how each activity for which	ions) e Accompl	ishment of Exemp	t Purp	oses A contributed important	tly to the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat Relationship of Activities to the Explain below how each activity for which	ions) e Accompl	ishment of Exemp	t Purp	oses A contributed important	tly to the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat Relationship of Activities to the Explain below how each activity for which	ions) e Accompl	ishment of Exemp	t Purp	oses A contributed important	tly to the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat Relationship of Activities to the Explain below how each activity for which	ions) e Accompl	ishment of Exemp	t Purp	oses A contributed important	tly to the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat Relationship of Activities to the Explain below how each activity for which	ions) e Accompl	ishment of Exemp	t Purp	oses A contributed important	tly to the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat Relationship of Activities to the Explain below how each activity for which	ions) e Accompl	ishment of Exemp	t Purp	oses A contributed important	tly to the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat Relationship of Activities to the Explain below how each activity for which	ions) e Accompl	ishment of Exemp	t Purp	oses A contributed important	tly to the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat Relationship of Activities to the Explain below how each activity for which	ions) e Accompl	ishment of Exemp	t Purp	oses A contributed important	tly to the
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13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat Relationship of Activities to the Explain below how each activity for which	ions) e Accompl	ishment of Exemp	t Purp	oses A contributed important	tly to the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat Relationship of Activities to the Explain below how each activity for which	ions) e Accompl	ishment of Exemp	t Purp	oses A contributed important	tly to the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat Relationship of Activities to the Explain below how each activity for which	ions) e Accompl	ishment of Exemp	t Purp	oses A contributed important	tly to the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat Relationship of Activities to the Explain below how each activity for which	ions) e Accompl	ishment of Exemp	t Purp	oses A contributed important	tly to the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat Relationship of Activities to the Explain below how each activity for which	ions) e Accompl	ishment of Exemp	t Purp	oses A contributed important	tly to the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat Relationship of Activities to the Explain below how each activity for which	ions) e Accompl	ishment of Exemp	t Purp	oses A contributed important	tly to the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat Relationship of Activities to the Explain below how each activity for which	ions) e Accompl	ishment of Exemp	t Purp	oses A contributed important	tly to the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat Relationship of Activities to the Explain below how each activity for which	ions) e Accompl	ishment of Exemp	t Purp	oses A contributed important	tly to the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculat Relationship of Activities to the Explain below how each activity for which	ions) e Accompl	ishment of Exemp	t Purp	oses A contributed important	236,820.

(209) 938-1010

Form **990-PF** (2019)

Phone no

		(2019) ANGELO									3183404	Pa	age 13
Part 2	XVII_	Information Re Exempt Organi	garding Tra	nsfers to	and Trans	actions	s and	Relation	ships W	ith Non	charitable		
		Exempt Organi	zations						_			Tvaa	N.
1 D	d the	organization directly ed in section 501(c)	y or indirectly e	engage in an	y of the follo	wing wit	h any c	other organ	ızatıon			Yes	No
re	elating	to political organiza	tions?	clion 501(c)(3) organizati	ons) or	ın secu	QΠ 327,					
аT	ransfer	rs from the reporting	g foundation to	a noncharit	able exempt	organiza	ation of	:					
(I) Cas	h									1 a (1		Х
	•	er assets									1 a (2		Х
		ansactions											
•	•	es of assets to a nor									1 b (1)		X
-	-	chases of assets fro tal of facilities, equi			organization						1 b (2		X
-	•	nbursement arrange	•	1 633013							1 b (3)		X
-	•	ns or loan guarante									1 b (5		X
(6	5) Perf	formance of services	s or membersh	iip or fundrai	sing solicitat	ions					1 b (6		X
c S	haring	of facilities, equipm	nent, mailing lis	sts, other as:	sets, or paid	employe	ees				1 c		Х
d If	the an	nswer to any of the a ls, other assets, or se isaction or sharing a	above is 'Yes,'	complete th	e following s	chedule the foun	Colum dation i	nn (b) shou received les	ld always s than fair	show the	fair market va	alue of	
(a) Line		(b) Amount involved			exempt organiza						, and sharing arr	angemen	ts
N/A		(2)	(0)		onompt organic			y o occupation	<u> </u>		, and onaring an	ungumun	
	_												

			-										
d ₁	escribe	undation directly or in ed in section 501(c) complete the follow	(other than sec	d with, or relaction 501(c)(ited to, one or 3)) or in sect	more ta	x-exem	pt organizat	ions		Ye	s X	No
) Name of organizat		(b)	Type of organ	nızatıon			(c) Des	scription o	f relationship		
N/A										. bra bra a brand and a manufacture			
							.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
		. <u>.</u>											
	Linder o	penalties of perjury, I decla	are that I have evam	upod this satura	raduding accome	anuan set	adular a	nd statements	and to the h	act of my know	wladaa and haliaf	it is true	
C:	correct,	and complete Declaration	n of preparer (other	than taxpayer) is	s based on all inf	ormation of	f which pr	reparer has any	y knowledge	est of my kno	wiedge and belief	it is true.	•
Sign Here	N.	Mh	1/1000	.)	. 111.	مام					this retu	IRS disc irn with th	ne -
11010	\ <u>\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ </u>	11 pm	1 10 100		1111	7/2C		TRUSTEE			See ins	r shown t tructions	oelow?
	Signa	Print/Type preparer's na	ame	Prena	Date rer's signature	· .		Title Date (, 1		PTIN	Yes	No
.				2	K. Mr	HA.	. 11	در الآثر	1 1	Check	J"	1 4 7 7	
Paid	. wo	LORI MATTHEN		JCIITAIDMM	<u>/ W / ! W</u>	M H	<i>WW</i>	TNC	,	self employed	12 02 10		
Prepa Use C			<u>CROCE, SAN</u> 3520 BROOM	NGUINETT	<u>I, & VAN</u> , STE 14		CEN,	INC.	Firm	s EIN - 46	6-285474 <i>6</i>		
036 C	riiy	· —	STOCKTON	CA OF 21							2001 020	1010	

BAA

STOCKTON, CA 95219

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

2019

Employer identification number

		2017 CHARITABI	LE TRUST			84-3183404	
Organiza	tion type (check one))					
Filers of:		Section:					
Form 990 or 990-EZ		501(c)()	(enter numb	er) organization			
		4947(a)(1) none:	xempt charitable	trust not treated as a p	private foundation	on	
Form 990-PF		527 political organization					
		X 501(c)(3) exempt private foundation					
		4947(a)(1) none	xempt charitable	trust treated as a priva	ate foundation		
		501(c)(3) taxable	e private foundat	ion			
		red by the General Rule (, (8), or (10) organizati	•	xes for both the Genera	al Rule and a Sp	pecial Rule See instructions	
General F	Rule						
X				eived, during the year, colee instructions for detern		g \$5,000 or more (in money or's total contributions	
Special R	tules						
	under sections 509(a)(received from any on	(1) and 170(b)(1)(A)(vi),	that checked Sch he year, total co	edule A (Form 990 or 990 atributions of the greate)-EZ), Part II, line	support test of the regulations e 13, 16a, or 16b, and that or (2) 2% of the amount on (i)	
	during the year, total	contributions of more	than \$1,000 exc	I0) filing Form 990 or 9 lusively for religious, ch nals Complete Parts I,	naritable, scienti	ived from any one contributor, fic, literary, or educational	
	during the year, conti \$1,000 If this box is charitable, etc., purpo	ributions <i>exclusively</i> fo checked, enter here th ose Don't complete ar	or religious, chari ne total contribut ny of the parts ui	table, etc., purposes, b	ut no such contr during the year applies to this o	-	
990-PF),	but it must answer 'N		f its Form 990, c	r check the box on line	H of its Form 9	ıle B (Form 990, 990-EZ, or 90-EZ or on ıts Form 990-PF,	

Employer identification number

ANGELO L. STAGNARO 2017 CHARITABLE TRUST

84-3183404

Part I∎	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	ANGELO STAGNARO TRUST 3520 BROOKSIDE ROAD, SUITE 141 STOCKTON, CA 95219	\$ <u>27,421,920</u> .	Person X Payroll				
(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)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	 	\$	Person Payroll Complete Part II for noncash contributions)				

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization

Employer identification number

ANGELO L: STAGNARO 2017 CHARITABLE TRUST

84-3183404

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed (d) Date received (b)
Description of noncash property given (a) No. from (c) FMV (or estimate) (See instructions.) Part I N/A (b)
Description of noncash property given (d) Date received (a) No. from (c) FMV (or estimate) (See instructions.) Part I (a) No. from (b)
Description of noncash property given (c) FMV (or estimate) (d) Date received (See instructions.) Part I (d) Date received (b)
Description of noncash property given (c) FMV (or estimate) (See instructions.) (a) No. from Part I (a) No. from (b)
Description of noncash property given (c) FMV (or estimate) (d) Date received Part I (See instructions.) (a) No. from (b)
Description of noncash property given (c) FMV (or estimate) (See instructions.) (d) Date received Part I BAA Schedule B (Form 990, 990-EZ, or 990-PF) (2019) Name of organization

ANGELO L. STAGNARO 2017 CHARITABLE TRUST

Employer identification number

84-3183404

the following line entry. For organizations co	empleting Part III, enter the total of	f exclusively religious, charitable, etc ,					
Use duplicate copies of Part III if additional	space is needed						
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
N/A							
	(e)						
Transferee's name, addres	Relationship of transferor to transferee						
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
(e) Transfer of gift							
Transferee's name, addres	Relationship of transferor to transferee						
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
, angest or give							
	- 1,36501						
Transferee's name, addres	Relationship of transferor to transferee						
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
Township and a second discount	Deletionship of transferred to the referred						
i ransieree's name, addres	Relationship of transferor to transferee						
		Schedule B (Form 990, 990-EZ, or 990-PF) (2019)					
	the following line entry. For organizations of contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional (b). Purpose of gift. N/A Transferee's name, addres Transferee's name, addres (b) Purpose of gift Transferee's name, addres Transferee's name, addres (b) Purpose of gift Transferee's name, addres	Purpose of gift N/A Transferee's name, address, and ZIP + 4 Purpose of gift Use of gift Transferee's name, address, and ZIP + 4 Transferee's name, address, and ZIP + 4 Transferee's name, address, and ZIP + 4 Purpose of gift Transferee's name, address, and ZIP + 4 Transferee's name, address, and ZIP + 4 Transferee's name, address, and ZIP + 4					

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

2019

FEDERAL STATEMENTS

PAGE 1

ANGELO L. STAGNARO 2017 CHARITABLE TRUST

84-3183404

STATEMENT 1 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS

CORPORATE STOCKS	VALUATION <u>METHOD</u>	BOOK VALUE	FAIR MARKETVALUE
HP INC 150 SHARES	COST \$ S	3,425. 3,425.	\$ 3,083. \$ 3,083.