

Form **990-PF**
 Department of the Treasury
 Internal Revenue Service

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

▶ **Do not enter social security numbers on this form as it may be made public.**
 ▶ **Go to www.irs.gov/Form990PF for instructions and the latest information.**

OMB No. 1545-0052
2020
Open to Public Inspection

For calendar year 2020, or tax year beginning 01-01-2020 , and ending 12-31-2020

Name of foundation INTEL FOUNDATION		A Employer identification number 94-3092928	
Number and street (or P.O. box number if mail is not delivered to street address) 3100 NE SHUTE ROAD	Room/suite	B Telephone number (see instructions) (503) 696-8080	
City or town, state or province, country, and ZIP or foreign postal code HILLSBORO, OR 97124		C If exemption application is pending, check here <input type="checkbox"/>	
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) ▶ \$ <u>82,014,242</u>		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis.)</i>			

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)</i>		(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)	105,000,000			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	153,500	153,500		
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	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)					
12 Total. Add lines 1 through 11	105,153,500	153,500	0		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	0	0	0	0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	12,549	0	0	12,549
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	2,432	0	0	1,657
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	32	32	0	0
	24 Total operating and administrative expenses. Add lines 13 through 23	15,013	32	0	14,206
	25 Contributions, gifts, grants paid	35,697,689			35,697,689
26 Total expenses and disbursements. Add lines 24 and 25	35,712,702	32	0	35,711,895	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	69,440,798				
b Net investment income (if negative, enter -0-)		153,468			
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	12,573,444		
	2 Savings and temporary cash investments		82,014,242	82,014,242
	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)			
	b Investments—corporate stock (attach schedule)			
	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)	12,573,444	82,014,242	82,014,242	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	0	0	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
	28 Retained earnings, accumulated income, endowment, or other funds	12,573,444	82,014,242	
29 Total net assets or fund balances (see instructions)	12,573,444	82,014,242		
30 Total liabilities and net assets/fund balances (see instructions) .	12,573,444	82,014,242		

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 29 (must agree with end-of-year figure reported on prior year's return)	1	12,573,444
2 Enter amount from Part I, line 27a	2	69,440,798
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3	4	82,014,242
5 Decreases not included in line 2 (itemize) ▶ _____	5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	82,014,242

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			

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

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			
b			
c			
d			
e			

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

SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE

1 Reserved	(a) Reserved	(b) Reserved	(c) Reserved	(d) Reserved
2 Reserved				2
3 Reserved				3
4 Reserved				4
5 Reserved				5
6 Reserved				6
7 Reserved				7
8 Reserved				8

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 fields for exempt foundations, tax under section 511, tax based on investment income, and credits/payments. Total tax due is 4,044.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Columns include question number, Yes, and No. Questions cover political activities, tax on political expenditures, and asset requirements.

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 ▶ <u>HTTPS://WWW.INTEL.COM</u>	13	Yes	
14 The books are in care of ▶ <u>PIA WILSON-BODY PRESEEXEC DIR</u> Telephone no. ▶ <u>(503) 696-8080</u>			
Located at ▶ <u>3100 NE SHUTE ROAD HILLSBORO OR</u> ZIP+4 ▶ <u>97124</u>			
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year ▶ <u>15</u>	15		<input type="checkbox"/>
16 At any time during calendar year 2020, 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	Yes	No
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶			

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

		Yes	No
1a During the year did the foundation (either directly or indirectly):			
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions <input type="checkbox"/> 1b	1b		No
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 2020? <input type="checkbox"/> 1c	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 2020, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2020? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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.) <input type="checkbox"/> 2b	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b If "Yes," did it have excess business holdings in 2020 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 2020.) <input type="checkbox"/> 3b	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 2020?	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))? Yes No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? Yes No

(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions. Yes No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes 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 **5b** **No**

Organizations relying on a current notice regarding disaster assistance check here.

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Yes No
If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **6b** **No**
If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No

b If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction? **7b**

8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year? Yes No

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

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
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	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

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

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
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	
2	
3	
4	

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	0
b	Average of monthly cash balances.	1b	26,697,250
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	26,697,250
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	26,697,250
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	400,459
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	26,296,791
6	Minimum investment return. Enter 5% of line 5.	6	1,314,840

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	1,314,840
2a	Tax on investment income for 2020 from Part VI, line 5.	2a	2,133
b	Income tax for 2020. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	2,133
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	1,312,707
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	1,312,707
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	1,312,707

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	35,711,895
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	35,711,895
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	35,711,895

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 2019	(c) 2019	(d) 2020
1 Distributable amount for 2020 from Part XI, line 7				1,312,707
2 Undistributed income, if any, as of the end of 2020:				
a Enter amount for 2019 only.			0	
b Total for prior years: 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2020:				
a From 2015.	35,150,028			
b From 2016.	44,378,622			
c From 2017.	41,082,698			
d From 2018.	36,830,264			
e From 2019.	32,726,600			
f Total of lines 3a through e.	190,168,212			
4 Qualifying distributions for 2020 from Part XII, line 4: ▶ \$ _____ 35,711,895				
a Applied to 2019, 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 2020 distributable amount.				1,312,707
e Remaining amount distributed out of corpus	34,399,188			
5 Excess distributions carryover applied to 2020. (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	224,567,400			
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 2019. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				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 2015 not applied on line 5 or line 7 (see instructions).	35,150,028			
9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a	189,417,372			
10 Analysis of line 9:				
a Excess from 2016.	44,378,622			
b Excess from 2017.	41,082,698			
c Excess from 2018.	36,830,264			
d Excess from 2019.	32,726,600			
e Excess from 2020.	34,399,188			

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 2020, 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				(e) Total
	(a) 2020	(b) 2019	(c) 2018	(d) 2017	
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 foundation 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. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

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	35,697,689
b <i>Approved for future payment</i> See Additional Data Table				
Total			▶ 3b	5,823,963

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) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

	Yes	No
1a(1)		No
1a(2)		No
1b(1)		No
1b(2)		No
1b(3)		No
1b(4)		No
1b(5)		No
1b(6)		No
1c		No
- 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. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

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

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? Yes No
- b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

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

Sign Here _____ Signature of officer or trustee	2021-04-05 Date	_____ Title
---	--------------------	----------------

May the IRS discuss this return with the preparer shown below (see instr.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Paid Preparer Use Only	Print/Type preparer's name CAREY MCKEE	Preparer's Signature _____	Date 2021-04-21	Check if self-employed <input type="checkbox"/>	PTIN P01281067
	Firm's name KPMG LLP				Firm's EIN 13-5565207
	Firm's address 550 SOUTH HOPE STREET SUITE 1500 LOS ANGELES, CA 90071				Phone no. (213) 972-4000

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
PIA WILSON-BODY 3100 NE SHUTE ROAD HILLSBORO, CA 97124	PRESIDENT/EXECUTIVE DIRECTOR 1.00	0	0	0
LESLIE CULBERTSON 2200 MISSION COLLEGE BLVD SANTA CLARA, CA 95052	DIRECTOR (THRU 03/31/20) 1.00	0	0	0
SANDRA RIVERA 3100 NE SHUTE ROAD SANTA CLARA, CA 97124	DIRECTOR 1.00	0	0	0
SHARON HECK 2200 MISSION COLLEGE BLVD SANTA CLARA, CA 95052	TREASURER (AS OF 11/01/20) 1.00	0	0	0
GARY KERSHAW 2200 MISSION COLLEGE BLVD SANTA CLARA, CA 95052	TREASURER (THRU 09/30/20) 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>				
ARIZONA EDUCATIONAL FOUNDATION 2100 N CENTRAL AVENUE SUITE 212 PHOENIX, AZ 85004		PC	40 FOR 40 TEACHER GRANTS	100,000
ARIZONA SCIENCE CENTER 600 EAST WASHINGTON STREET PHOENIX, AZ 85004		PC	ARIZONA SCIENCE & ENGINEERING FAIR	35,000
ASOCIACION EMPRESARIAL PARA EL DESARROLLO SABANA SUR OFICENTRO EJECUTIVO LA SAN JOSE 1989-1000 CS		NC	2020 COSTA RICA COVID-19 COMMUNITY RESPONSE GIFT	100,000
Total ▶ 3a				35,697,689

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>				
COMMUNITY FOUNDATION OF IRELAND 3RD FLOOR PHIBSBOROUGH TOWER DUBLIN, DUBLIN D07 XH2D EI		NC	2020 IRELAND COVID-19 COMMUNITY RESPONSE GIFT	550,000
CORPORATIVA DE FUNDACIONES AC LOPEZ COTILLA NO 2139 GUADALAJARA, JALISCO 44130 MX		NC	2020 MEXICO COVID-19 COMMUNITY RESPONSE GIFT	15,000
FRIENDS OF GALILEE MEDICAL CENTER POBOX 21 NAHARIYA 22100 IS		NC	2020 ISRAEL COVID-19 COMMUNITY RESPONSE GIFT	75,000
Total ▶ 3a				35,697,689

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>				
FRIENDS OF RABIN MEDICAL CENTER 39 JABOTINSKY PETAH TIKVA 0004941492 IS		NC	2020 ISRAEL COVID-19 COMMUNITY RESPONSE GIFT	75,000
FRIENDS OF SOROKA MEDICAL CENTER PO 151 SOROKA MEDICAL CENTER BEERSHEVA 84105 IS		NC	2020 ISRAEL COVID-19 COMMUNITY RESPONSE GIFT	75,000
FUNDACIN MEXICANA DE APOYO INFANTIL AC FRANCISCO SOSA 30 COL VILLA COYOAC MEXICO CITY 04010 MX		NC	2020 MEXICO COVID-19 COMMUNITY RESPONSE GIFT	5,000
Total ▶ 3a				35,697,689

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>				
HADASSAH OFFICES IN ISRAEL PO BOX 12249 JERUSALEM 0009112102 IS		NC	2020 ISRAEL COVID-19 COMMUNITY RESPONSE GIFT	75,000
HILLSBORO COMMUNITY FOUNDATION INC PO BOX 808 HILLSBORO, OR 97123		PC	2020 OREGON COVID-19 COMMUNITY RESPONSE GIFT	50,000
HILLSBORO SCHOOLS FOUNDATION 5193 NE ELAM YOUNG PKWY STE A HILLSBORO, OR 97124		PC	2020 OREGON COVID-19 COMMUNITY RESPONSE GIFT	25,000
Total ▶ 3a				35,697,689

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>				
LEV CHASHYALAG 7 HAIFA 0003105502 IS		NC	2020 ISRAEL COVID-19 COMMUNITY RESPONSE GIFT	100,000
MASSACHUSETTS SCIENCE & ENGINEERING FAIR INC 955 MASSACHUSETTS AVE 350 CAMBRIDGE, MA 02139		PC	2020 MASSACHUSETTS INTERNATIONAL SCIENCE AND ENGINEERING FAIR (ISEF) DELEGATION	5,000
MATAN-INVESTING IN THE COMMUNITY 33 YAVETZ STREET TEL AVIV 65258 IS		PC	MOBILEYE EMPLOYEE DONATION MATCHING PROGRAM	250,000
Total	▶ 3a			35,697,689

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>				
MICRO ENTERPRISE SERVICES OF OREGON 4008 NE M L KING BLVD PORTLAND, OR 97212		PC	2020 OREGON COVID-19 COMMUNITY RESPONSE GIFT	100,000
MISSION CITY COMMUNITY FUND PO BOX 587 SANTA CLARA, CA 95052		PC	2020 CALIFORNIA COVID-19 COMMUNITY RESPONSE GIFT	100,000
OREGON COMMUNITY FOUNDATION 1221 SW YAMHILL ST SUITE 100 PORTLAND, OR 97205		PC	2020 OREGON COVID-19 COMMUNITY RESPONSE GIFT	500,000
Total				35,697,689

▶ 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>				
PENANG SCIENCE CLUSTER 1-3-21 KRYSTAL POINT CORPORATE PARK BAYAN LEPAS PENANG, BAYAN LEPAS PENAN 11900 MY				
		NC	2020 PENANG COVID-19 COMMUNITY RESPONSE GIFT	400,000
PORTLAND COMMUNITY COLLEGE FOUNDATION PO BOX 19000 PORTLAND, OR 97280				
		PC	2020 OREGON COVID-19 COMMUNITY RESPONSE GIFT	25,000
PORTLAND STATE UNIVERSITY FOUNDATION PO BOX 243 PORTLAND, OR 97207				
		PC	2020 OREGON COVID-19 COMMUNITY RESPONSE GIFT	100,000
Total ▶ 3a				35,697,689

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>				
RIO RANCHO COMMUNITY FOUNDATION 4001 SOUTHERN BLVD SUITE B RIO RANCHO, NM 87124		PC	40 FOR 40 TEACHER GRANT	100,000
RIO RANCHO PUBLIC SCHOOLS 500 LASER ROAD NE RIO RANCHO, NM 87124		PC	RIO RANCHO PUBLIC SCHOOL SCIENCE EXPO	5,000
SANTA FE COMMUNITY FOUNDATION 501 HALONA STREET SANTA FE, NM 87505		PC	2020 NEW MEXICO COVID-19 COMMUNITY RESPONSE GIFT	275,000
Total ▶ 3a				35,697,689

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>				
SCHOLARSHIP AMERICA C/O FIRST NATIONAL BANK PO BOX 240 SAINT PETER, MN 56082		PC	2020 ANDY GROVE SCHOLARSHIP FOR INTEL EMPLOYEES' CHILDREN	1,319,415
SILICON VALLEY COMMUNITY FOUNDATION 2440 W EL CAMINO REAL STE 300 MOUNTAIN VIEW, CA 94040		PC	2020 CALIFORNIA COVID-19 COMMUNITY RESPONSE GIFT	100,000
STEM NEXT OPPORTUNITY FUND 2305 HISTORIC DECATUR ROAD SUITE 100 SAN DIEGO, CA 92106		PC	2020 MILLION GIRLS MOONSHOT FOR STEM DIVERSITY	1,000,000
Total ▶ 3a				35,697,689

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 FUND FOR PORTLAND PUBLIC SCHOOLS 501 N DIXON ST PORTLAND, OR 97227		PC	2020 OREGON COVID-19 COMMUNITY RESPONSE GIFT	25,000
THE JERUSALEM FOUNDATION RIVKA 11 ST JERUSALEM 0009346117 IS		NC	2020 ISRAEL COVID-19 COMMUNITY RESPONSE GIFT	100,000
THE NATIONAL PROJECT FOR SOCIAL DEVELOPMENT 23 HAMELACHA ST ROSH HAAYIN 0004809173 IS		NC	2020 ISRAEL COVID-19 COMMUNITY RESPONSE GIFT	100,000
Total ▶ 3a				35,697,689

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 UK ONLINE GIVING FOUNDATION 6 TRULL FARM BUILDINGS TETBURY, TRULL GL88SQ UK				
		PC	2020 MATCHING GRANTS, COVID-19 GRANTS	2,827,755
AMERICAN CHAMBER OF COMMERCE IN VIETNAM SUITE 323 NEW WORLD HOTEL 76 LE LA HO CHI MINH CITY, HANOI 700000 VM				
		NC	2020 VIETNAM COVID-19 COMMUNITY RESPONSE GIFT	100,000
AMERICAN ONLINE GIVING FOUNDATION INC PO BOX 645725 PITTSBURGH, PA 15264				
		PC	2020 MATCHING GIFTS, VOLUNTEER MATCHING GRANTS, FALL SEED GRANTS, COVID-19 GRANTS	26,085,519
Total				35,697,689

▶ **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>				
ARIZONA COMMUNITY FOUNDATION 2201 E CAMELBACK ROAD SUITE 405B PHOENIX, AZ 85016		PC	2020 ARIZONA COVID-19 COMMUNITY RESPONSE GIFT	900,000
Total				35,697,689



3a

TY 2020 Accounting Fees Schedule**Name:** INTEL FOUNDATION**EIN:** 94-3092928

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX PREPARATION	12,549	0	0	12,549

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2020 Expenditure Responsibility Statement

Name: INTEL FOUNDATION

EIN: 94-3092928

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
PENANG SCIENCE CLUSTER	1-3-21 KRYSTAL POINT CORPORATE PARK BAYAN LEPAS PENANG 11900 MY	2020-04-10	400,000	2020 COVID-19 COMMUNITY RESPONSE GIFT	397,000	NONE	1/4/21		REPORTS WERE REVIEWED BY THE FOUNDATION AND FUNDS APPEARED TO BE EXPENDED IN ACCORDANCE WITH THE AGREED UPON TERMS AND CONDITIONS WITH NO DIVERSION NOTED.
AMERICAN CHAMBER OF COMMERCE IN VIETNAM	SUITE 323 NEW WORLD HOTEL 76 LE LAI STREET DISTRICT 1 HO CHI MINH CITY VM	2020-04-22	100,000	2020 COVID-19 COMMUNITY RESPONSE GIFT	100,000	N/A	FINAL REPORT DUE 4/15/21		
COMMUNITY FOUNDATION OF IRELAND	3RD FLOOR PHIBSBOROUGH TOWER DUBLIN 7 DUBLIN EI	2020-04-20	550,000	2020 COVID-19 COMMUNITY RESPONSE GIFT	550,000	N/A	FINAL REPORT DUE 4/15/21		
CORPORATIVA DE FUNDACIONES AC	LOPEZ COTILLA NO 2139 GUADALAJARA, JALISCO 44130 MX	2020-05-07	15,000	2020 COVID-19 COMMUNITY RESPONSE GIFT	15,000	N/A	FINAL REPORT DUE 4/15/21		
ASOCIACION EMPRESARIAL PARA EL DESARROLLO	SABANA SUR OFICENTRO EJECUTIVO LA SABANA EDIFICIO NO6 SEGUNDO PISO CO SAN JOSE CS	2020-05-05	100,000	2020 COVID-19 COMMUNITY RESPONSE GIFT	100,000	N/A	FINAL REPORT DUE 4/15/21		
THE JERUSALEM FOUNDATION	RIVKA 11 ST JERUSALEM IS	2020-05-05	100,000	2020 COVID-19 COMMUNITY RESPONSE GIFT	100,000	N/A	FINAL REPORT DUE 4/15/21		

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
LEV CHASH	YALAG 7 HAIFA IS	2020-05-18	100,000	2020 COVID-19 COMMUNITY RESPONSE GIFT	100,000	N/A	FINAL REPORT DUE 4/15/21		
FUNDACION MEXICANA DE APOYO INFANTIL AC	FRANCISCO SOSA 30 COL VILLA COYOACAN MEXICO CITY 04000 MX	2020-06-01	5,000	2020 COVID-19 COMMUNITY RESPONSE GIFT	5,000	N/A	FINAL REPORT DUE 4/15/21		
FRIENDS OF SOROKA MEDICAL CENTER	PO 151 SOROKA MEDICAL CENTER BEERSHEVA 84105 IS	2020-05-22	75,000	2020 COVID-19 COMMUNITY RESPONSE GIFT	75,000	N/A	FINAL REPORT DUE 4/15/21		
FRIENDS OF RABIN MEDICAL CENTER	39 JABOTINSKY PETAH TIKVA 0004941492 IS	2020-06-15	75,000	2020 COVID-19 COMMUNITY RESPONSE GIFT	75,000	N/A	FINAL REPORT DUE 4/15/21		
THE NATIONAL PROJECT FOR SOCIAL DEVELOPMENT	23 HAMELACHA ST ROSH HAAYIN 0004809173 IS	2020-05-26	100,000	2020 COVID-19 COMMUNITY RESPONSE GIFT	100,000	N/A	FINAL REPORT DUE 4/15/21		
HADASSAH OFFICES IN ISRAEL	PO BOX 12249 JERUSALEM 0009112102 IS	2020-05-28	75,000	2020 COVID-19 COMMUNITY RESPONSE GIFT	75,000	N/A	FINAL REPORT DUE 4/15/21		

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
FRIENDS OF GALILEE MEDICAL CENTER	POBOX 21 NAHARIYA 22100 IS	2020-05-28	75,000	2020 COVID-19 COMMUNITY RESPONSE GIFT	75,000	N/A	FINAL REPORT DUE 4/15/21		

TY 2020 General Explanation Attachment

Name: INTEL FOUNDATION

EIN: 94-3092928

General Explanation Attachment

Identifier	Return Reference	Explanation	
1		FORM 990PF - GENERAL EXPLANATION ATTACHMENT	FORM 990-PF, PART VII-B, LINE 1A THE FOUNDATION RECEIVES FREE OFFICE SPACE AND IN-HOUSE ACCOUNTING SERVICES FROM A RELATED COMPANY (INTEL CORPORATION). THE FOUNDATION OFFICERS ALSO HOLD LEADERSHIP POSITIONS IN THE CORPORATION. THIS ACT QUALIFIES UNDER THE SPECIAL RULES AND IS NOT AN ACT OF SELF-DEALING. FORM 990-PF, PART XV, LINE 3A THE FOUNDATION RELIED UPON A THIRD PARTY EQUIVALENCY DETERMINATION OF A FOREIGN CHARITY, THE UK ONLINE GIVING FOUNDATION, TO SATISFY THE REQUIREMENTS DESCRIBED IN REG 53.4945-5(A)(5). THIS CHARITY IS THEREFORE LISTED AS "PC" AS THE FOUNDATION STATUS OF THE RECIPIENT IN THE GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR. FORM 990-PF, PART XV, LINE 3B THE FOUNDATION CONTRACTED WITH A PROFESSIONAL SERVICE CORPORATION TO ASSIST WITH THE EQUIVALENCY DETERMINATION OF THE FOREIGN CHARITY, MATAN INVESTING IN THE COMMUNITY. THIS CHARITY IS THEREFORE LISTED AS "PC" AS THE FOUNDATION STATUS OF THE RECIPIENT IN THE GRANTS APPROVED FOR FUTURE PAYMENT.

TY 2020 Other Expenses Schedule**Name:** INTEL FOUNDATION**EIN:** 94-3092928**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK FEES	32	32	0	0

TY 2020 Taxes Schedule**Name:** INTEL FOUNDATION**EIN:** 94-3092928**Taxes Schedule**

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
2019 FEDERAL TAXES & INTEREST	775	0	0	0
STATE REGISTRATION FEE	1,657	0	0	1,657

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.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047
2020

Name of the organization
INTEL FOUNDATION

Employer identification number
94-3092928

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
INTEL FOUNDATION

Employer identification number
94-3092928

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	INTEL CORPORATION 5350 NE ELAM YOUNG PARKWAY HILLSBORO, OR 97124	\$ 105,000,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)

Name of organization INTEL FOUNDATION	Employer identification number 94-3092928
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Part II Noncash Property			
(a) No. from Part I	(b) Description of noncash property given <small>(see instructions). Use duplicate copies of Part II if additional space is needed.</small>	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____

Name of organization
INTEL FOUNDATION

Employer identification number
94-3092928

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
	_____ _____	_____ _____	_____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____	

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

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

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