

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

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

▶ **Do not enter social security numbers on this form as it may be made public.**  
 ▶ **Information about Form 990-PF and its instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).**

OMB No 1545-0052  
**2017**  
**Open to Public Inspection**

**For calendar year 2017, or tax year beginning 01-01-2017, and ending 12-31-2017**

Name of foundation Overlook International Foundation Inc		<b>A Employer identification number</b> 20-1164239
Number and street (or P O box number if mail is not delivered to street address) Inverness Cnsl LLC 845 3rd Ave 8F	Room/suite	<b>B Telephone number</b> (see instructions) (212) 207-2122
City or town, state or province, country, and ZIP or foreign postal code New York, NY 10022		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>
<b>G</b> 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		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
<b>H</b> 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		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
<b>I</b> Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 67,932,581	<b>J</b> Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

<b>Part I Analysis of Revenue and Expenses</b> <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)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc., received (attach schedule)	19,085,354			
	<b>2</b> Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B				
	<b>3</b> Interest on savings and temporary cash investments	93,726	93,726		
	<b>4</b> Dividends and interest from securities	819,818	819,818		
	<b>5a</b> Gross rents				
	<b>b</b> Net rental income or (loss)				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10	8,808,185			
	<b>b</b> Gross sales price for all assets on line 6a				
	<b>7</b> Capital gain net income (from Part IV, line 2)		8,808,185		
	<b>8</b> Net short-term capital gain				
	<b>9</b> Income modifications				
	<b>10a</b> Gross sales less returns and allowances	0			
<b>b</b> Less Cost of goods sold	0				
<b>c</b> Gross profit or (loss) (attach schedule)	0				
<b>11</b> Other income (attach schedule)	390,360	390,360	0		
<b>12 Total.</b> Add lines 1 through 11	29,197,443	10,112,089	0		
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc				
	<b>14</b> Other employee salaries and wages				
	<b>15</b> Pension plans, employee benefits				
	<b>16a</b> Legal fees (attach schedule)	1,221	0	0	0
	<b>b</b> Accounting fees (attach schedule)	0	0	0	0
	<b>c</b> Other professional fees (attach schedule)	38,697	5,585	0	0
	<b>17</b> Interest				
	<b>18</b> Taxes (attach schedule) (see instructions)	185,000	0	0	0
	<b>19</b> Depreciation (attach schedule) and depletion	0	0	0	
	<b>20</b> Occupancy	42			
	<b>21</b> Travel, conferences, and meetings	817			
	<b>22</b> Printing and publications				
	<b>23</b> Other expenses (attach schedule)	1,222,220	1,219,928	0	90
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23	1,447,997	1,225,513	0	90
	<b>25</b> Contributions, gifts, grants paid	9,796,028			9,796,028
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	11,244,025	1,225,513	0	9,796,118	
<b>27</b> Subtract line 26 from line 12					
<b>a Excess of revenue over expenses and disbursements</b>	17,953,418				
<b>b Net investment income</b> (if negative, enter -0-)		8,886,576			
<b>c Adjusted net income</b> (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
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	3,825,562	6,053,667	6,053,667
	<b>2</b> Savings and temporary cash investments . . . . .			
	<b>3</b> Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____	0	0	0
	<b>4</b> Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____		0	0
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .	0	0	0
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____ 0 Less allowance for doubtful accounts ▶ _____ 0	0	0	0
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .			
	<b>10a</b> Investments—U S and state government obligations (attach schedule)	0	0	0
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .	7,536,900	18,248,098	18,248,098
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .	0		0
	<b>11</b> Investments—land, buildings, and equipment basis ▶ _____ 0 Less accumulated depreciation (attach schedule) ▶ _____ 0	0		0
	<b>12</b> Investments—mortgage loans . . . . .			
	<b>13</b> Investments—other (attach schedule) . . . . .	36,214,311	43,600,816	43,600,816
	<b>14</b> Land, buildings, and equipment basis ▶ _____ 0 Less accumulated depreciation (attach schedule) ▶ 0	0		0
<b>15</b> Other assets (describe ▶ _____)	42,963	30,000	30,000	
<b>16 Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	47,619,736	67,932,581	67,932,581	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .			
	<b>18</b> Grants payable . . . . .			
	<b>19</b> Deferred revenue . . . . .			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons	0	0	
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .	0	0	
	<b>22</b> Other liabilities (describe ▶ _____)	0	68	
	<b>23 Total liabilities</b> (add lines 17 through 22) . . . . .	0	68	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	<b>24</b> Unrestricted . . . . .			
	<b>25</b> Temporarily restricted . . . . .			
	<b>26</b> Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>			
	<b>27</b> Capital stock, trust principal, or current funds . . . . .			
	<b>28</b> Paid-in or capital surplus, or land, bldg , and equipment fund			
<b>29</b> Retained earnings, accumulated income, endowment, or other funds	47,619,736	67,932,513		
<b>30 Total net assets or fund balances</b> (see instructions) . . . . .	47,619,736	67,932,513		
<b>31 Total liabilities and net assets/fund balances</b> (see instructions) .	47,619,736	67,932,581		

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b> Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	<b>1</b>	47,619,736
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	17,953,418
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	2,359,359
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	67,932,513
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	0
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	<b>6</b>	67,932,513

**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)
<b>1 a</b> Gains/Losses from partnerships	P		
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

(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)
<b>a</b> 8,808,185			8,808,185
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(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	
<b>a</b>		0	8,808,185
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	2	8,808,185
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	0

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

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

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

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2016	9,602,700	46,950,310	0.204529
2015	5,148,715	49,547,788	0.103914
2014	1,958,563	43,116,287	0.045425
2013	1,554,608	21,652,121	0.071799
2012	780,642	19,132,410	0.040802

<b>2</b> Total of line 1, column (d)	2	0.466469
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0.093294
<b>4</b> Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	4	48,856,156
<b>5</b> Multiply line 4 by line 3	5	4,557,986
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	6	88,866
<b>7</b> Add lines 5 and 6	7	4,646,852
<b>8</b> Enter qualifying distributions from Part XII, line 4	8	9,796,118

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

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

Table with 11 rows for excise tax calculation. Includes fields for exempt foundations, tax under section 511, subtitle A tax, and credits/payments. Total amount owed is 95,367, with 95,367 refunded.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions about political campaigns, political expenditures, and state reporting. Columns for Yes/No.

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-14 regarding controlled entities, donor advised funds, public inspection requirements, and books in care.

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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.

Table with 3 columns: Question, Yes, No. Row 16 regarding interest in foreign countries.

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.

Main table with 3 columns: Question, Yes, No. Rows 1a-4b regarding Form 4720 exceptions and requirements.

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

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

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

Part VIII

Table with 5 columns: (a) Name and address, (b) Title and average hours per week, (c) Compensation, (d) Contributions to employee benefit plans, (e) Expense account. Includes entries for Richard H Lawrence, Dee M Lawrence, and Philip S Lawrence.

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

Table with 5 columns: (a) Name and address of each employee paid more than \$50,000, (b) Title and average hours per week, (c) Compensation, (d) Contributions to employee benefit plans, (e) Expense account.

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

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

Table with 3 columns: (a) Name and address of each person paid more than \$50,000, (b) Type of service, (c) Compensation.

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

Part IX-A Summary of Direct Charitable Activities

Table with 2 columns: Description of activities and Expenses. Includes instructions to list the four largest direct charitable activities.

Part IX-B Summary of Program-Related Investments (see instructions)

Table with 2 columns: Description of investments and Amount. Includes instructions to describe the two largest program-related investments.

Total. Add lines 1 through 3

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	7,292,747
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	2,641,554
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	39,665,857
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	49,600,158
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	49,600,158
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	744,002
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	48,856,156
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	2,442,808

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

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	2,442,808
<b>2a</b>	Tax on investment income for 2017 from Part VI, line 5.	<b>2a</b>	88,866
<b>b</b>	Income tax for 2017 (This does not include the tax from Part VI).	<b>2b</b>	4,816
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	93,682
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	2,349,126
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	
<b>5</b>	Add lines 3 and 4.	<b>5</b>	2,349,126
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	2,349,126

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	9,796,118
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	0
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	9,796,118
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	<b>5</b>	88,866
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	9,707,252

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
<b>1</b> Distributable amount for 2017 from Part XI, line 7				2,349,126
<b>2</b> Undistributed income, if any, as of the end of 2017				
<b>a</b> Enter amount for 2016 only. . . . .				
<b>b</b> Total for prior years 20___, 20___, 20___				
<b>3</b> Excess distributions carryover, if any, to 2017				
<b>a</b> From 2012. . . . .				
<b>b</b> From 2013. . . . .				576,641
<b>c</b> From 2014. . . . .				163,209
<b>d</b> From 2015. . . . .				2,724,982
<b>e</b> From 2016. . . . .				7,430,374
<b>f</b> Total of lines 3a through e. . . . .	10,895,206			
<b>4</b> Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ _____ 9,796,118				
<b>a</b> Applied to 2016, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2017 distributable amount. . . . .				2,349,126
<b>e</b> Remaining amount distributed out of corpus	7,446,992			
<b>5</b> Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a) )				0
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	18,342,198			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .				
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018 . . . . .				0
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .	0			
<b>8</b> Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions). . . . .	0			
<b>9</b> Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a . . . . .	18,342,198			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2013. . . . .				576,641
<b>b</b> Excess from 2014. . . . .				163,209
<b>c</b> Excess from 2015. . . . .				2,724,982
<b>d</b> Excess from 2016. . . . .				7,430,374
<b>e</b> Excess from 2017. . . . .				7,446,992

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

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

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

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

	Tax year	Prior 3 years			<b>(e) Total</b>
	<b>(a) 2017</b>	<b>(b) 2016</b>	<b>(c) 2015</b>	<b>(d) 2014</b>	
	0				0
<b>b</b> 85% of line 2a . . . . .	0				0
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .	9,796,118				9,796,118
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					0
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .	9,796,118				9,796,118

**3** Complete 3a, b, or c for the alternative test relied upon

**a** "Assets" alternative test—enter

(1) Value of all assets . . . . .

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

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

**c** "Support" alternative test—enter

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

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

(3) Largest amount of support from an exempt organization

(4) Gross investment income

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

**1 Information Regarding Foundation Managers:**

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

**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

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

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

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

---

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

---

**c** Any submission deadlines

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**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)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . .</b> ▶ <b>3a</b>				9,796,028
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b> ▶ <b>3b</b>				0



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

Part XVII

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

Table with 3 columns: Question (1a(1)-(6), 1c), Yes, 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

Table with 4 columns: (a) Line No, (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements

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

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.
Signature of officer or trustee: \*\*\*\*\* Date: 2018-11-15 Title: \*\*\*\*\*
May the IRS discuss this return with the preparer shown below (see instr )? [x] Yes [ ] No

Paid Preparer Use Only section containing: Print/Type preparer's name (Brian Rowbotham), Preparer's Signature, Date, Check if self-employed, PTIN (P01282631), Firm's name (CROWE LLP), Firm's EIN (35-0921680), Firm's address (575 Market Street Suite 3300, San Francisco, CA 941055829), Phone no (415) 576-1100

**Form 990PF Part XV Line 1a - 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).**

Richard H Lawrence President

Dee M Lawrence Vice President

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
100 Friends Project 2140 Shattuck Ave 2050 Berkeley, CA 94704	None	PC	Underserved populations	500
A Home (Apropos Housing and Management Opportunities Enterprises Inc) 141 Tompkins Ave 3rd Floor Pleasantville, NY 10570	None	PC	Underserved populations	10,000
Access4Bikes Foundation PO Box 33 Woodacre, CA 94973	None	PC	General Support	24,000
<b>Total . . . . . ▶</b> <b>3a</b>				9,796,028

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Accion International 56 Roland St Suite 300 Boston, MA 02129	None	PC	Underserved populations	500
Activation Energy Cyclotron Road 5214 F DIAMOND HEIGHTS BLVD 723 San Francisco, CA 94131	None	PC	General Support	250,000
Adopt a Family of Marin 496 B Street San Rafael, CA 94901	None	PC	Underserved populations	1,000
<b>Total . . . . . ▶</b> <b>3a</b>				9,796,028



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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
AGE Africa PO Box 15298 Washington, DC 20003	None	PC	Child Support	10,000
Aim High PO Box 410715 San Francisco, CA 941410715	None	PC	Child Support	12,000
Animal Welfare Institute 900 Pennsylvania Ave Washington, DC 20003	None	PC	Animal welfare	1,000
<b>Total</b> . . . . . <b>3a</b>				9,796,028

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
APA Family Support Services 10 Nottingham Place San Francisco, CA 94133	None	PC	Immigration	2,000
Aprovecho Research Institute PO Box 1175 Cottage Grove, OR 97424	None	PC	Climate Change	18,500
Arcas Through Project COPE Columbus Zoo Columbus Zoo PO Box 400 Powell, OH 43065	None	PC	Animal welfare	3,000
<b>Total . . . . . ▶</b> <b>3a</b>				9,796,028

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Asian Law Caucus 55 Columbus Avenue San Francisco, CA 94111	None	PC	Immigration	1,000
Audubon Canyon Ranch PO Box 577 Stinson Beach, CA 949709800	None	PC	Climate Change	200
The Bay School of San Francisco 35 Keyes Ave PO Box 29610 San Francisco, CA 941290610	None	PC	Education	30,000
<b>Total</b> . . . . . <b>3a</b>				9,796,028

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Beginning with Children Foundation 575 Lexington Ave 33rd Flr New York, NY 10022	None	PC	Child Support	10,000
Berea CollegeCPO 2216 Berea, KY 40404	None	PC	Education	20,000
Block Island Medical Center PO Box 919 Payne Rd Block Island, RI 02807	None	PC	Medical and health	2,000
<b>Total . . . . . ▶</b> <b>3a</b>				9,796,028

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Bonita House 6333 Telegraph Avenue Suite 102 Oakland, CA 946091328	None	PC	Medical and Health	2,000
Bowdoin College4100 College Station Brunswick, ME 040118432	None	PC	Education	528,000
Bridge School545 Eucalyptus Ave Hillsborough, CA 940106404	None	PC	Education	300
<b>Total</b> . . . . . <b>3a</b>				9,796,028

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Brown University Brown University Gift Cashier Box 1 877 Providence, RI 02912	None	PC	Education	5,100
Canal Alliance 91 Larkspur St San Rafael, CA 94901	None	PC	Immigration	15,000
Capital Public Radio 7055 Folsom Ave Sacramento, CA 95826	None	PC	General Support	10,000
<b>Total . . . . . ▶</b> <b>3a</b>				9,796,028

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

Recipient Name and address (home or business)	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
<b>a</b> <i>Paid during the year</i>				
CDP North America 132 Crosby Street 8th Floor Attn Lance Pierce New York, NY 10012	None	PC	Climate Change	35,000
Center for Domestic Peace 734 A Street San Rafael, CA 949013923	None	PC	Child Support	300
CERES 99 Chauncy Street 6th Floor Boston, MA 02111	None	PC	General Support	20,000
<b>Total</b> . . . . . <b>3a</b>				9,796,028

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Coalfield Development Corporation 312 HALL STREET Wayne, WV 25570	None	PC	Climate Change	3,000
Committee for the Great Salt Pond PO Box 1092 New Shoreham, RI 02807	None	PC	Climate Change	1,000
Community Venture Partners 73 Surrey Avenue Mill Valley, CA 94941	None	PC	Marin	5,000
<b>Total</b> . . . . . <b>3a</b>				9,796,028



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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Cool Effect Inc 919 Sir Francis Drake Blvd Suite 20 1 Kentfield, CA 94941	None	PC	Climate Change	6,000,000
Dedication To Special Ed c/o Marin County Office of Education PO Box 4925 San Rafael, CA 94913	None	PC	Education	300
Detroit Food Academy 4444 Second Ave Detroit, MI 48201	None	PC	Underserved populations	3,000
<b>Total . . . . .</b> ▶ <b>3a</b>				9,796,028


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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Dickinson College PO Box 1773 Carlisle, PA 170132896	None	PC	Education	30,000
Forest Trends Association 1203 19th Street NW 4th Floor Washington, DC 20036	None	PC	Climate Change	15,000
Give2Asia obo Child's Dream Foundation 465 California St 9th Floor San Francisco, CA 94104	None	PC	Child Support	5,000
<b>Total</b> . . . . . <b>3a</b>				9,796,028

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Global AIDS Interfaith Alliance (GAIA) 700 Larkspur Landing Circle Suite 2 50 Larkspur, CA 94939	None	PC	Medical and health	500
Greenfaith101 S 3RD AVE APT 12 Highland Park, NJ 08904	None	PC	General Support	20,000
Halleck Creek Riding Club for Handicapped Children aka Halleck Creek Ranch 174 Old Rancheria Road Nicasio, CA 94946	None	PC	Underserved populations	35,000
<b>Total . . . . .</b> ▶ <b>3a</b>				9,796,028

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

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
High Watch Recovery Center 62 Carter Road POBox 607 Kent, CT 06757	None	PC	Education	1,000
Hospice by the Bay 17 E Sir Francis Drake Blvd Larkspur, CA 94939	None	PC	Medical and health	5,000
International Collaborative for Science 81 Kirkland St Ste 2 Cambridge, MA 02138	None	PC	Underserved populations	40,000
<b>Total</b> . . . . . 				9,796,028
<b>3a</b>				


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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
KQED2601 Mariposa Street San Francisco, CA 941101426	None	PC	Education	1,000
Lark Theater549 Magnolia Ave Larkspur, CA 94939	None	PC	Marin	200
League of Conservation Voters 1920 L Street NW Suite 800 Washington, DC 20036	None	PC	General Support	2,500
<b>Total . . . . .</b> ▶ <b>3a</b>				9,796,028

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

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Love is the Answer (LITA) 4340 Redwood Highway 101 San Rafael, CA 94903	None	PC	Marin	300
Marin Agricultural Land Trust PO Box 809 Pt Reyes Station, CA 94956	None	PC	Marin	200
Marin Audubon Society PO Box 599 Mill Valley, CA 949420599	None	PC	Medical and health	100
<b>Total</b> . . . . . <b>3a</b>				9,796,028

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Marin County Library 3501 Civic Center Drive 414 San Rafael, CA 94903	None	PC	Marin	200
Marin General Hospital Foundation 100 B Drakes Landing Suite 255 Greenbrae, CA 94904	None	PC	Marin	2,000
Marin Humane Society 171 Bel Marin Keys Blvd Novato, CA 94949	None	PC	Medical and health	200
<b>Total</b> . . . . . 				9,796,028
<b>3a</b>				

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


Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Marin YMCA 1500 Los Gamos Dr San Rafael, CA 94903	None	PC	Medical and health	200
MCBC MMB Marin County Bicycle Coalition/Marin Museum of Biking POBox1115 Fairfax, CA 94978	None	PC	General Support	3,000
Medecins Sans Frontieres 333 Seventh Ave 2nd Flr New York, NY 10001	None	PC	Climate Change	500
<b>Total</b> . . . . .			▶	9,796,028
<b>3a</b>				



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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Medshare International 3240 Clifton Springs Road Decatur, GA 30034	None	PC	Medical and health	17,000
Napa Valley Community Foundation 3299 Claremont Way 2 Napa, CA 94558	None	PC	General Support	1,000
Nature Conservancy 4245 N Fairfax Dr Ste 100 Arlington, VA 222031606	None	PC	Climate Change	138,333
<b>Total</b> . . . . . <b>3a</b>				9,796,028

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

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Organization for Community Medical and health Outreach PO Box 512 Riderwood, MD 21139	None	PC	Medical and health	15,000
Pan Mass Challenge 77 4th Ave Needham, MA 02494	None	PC	Anti Corruption/Law	40,900
Partnership for Transparency Fund 1110 Vermont Ave NW Suite 500 Washington, DC 20005	None	PC	Medical and health	75,000
<b>Total</b> . . . . . 				<b>9,796,028</b>
<b>3a</b>				

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PD Active (Parkinson's Disease) PD Active PO Box 9246 Berkeley, CA 94709	None	PC	Medical and health	2,000
Planned Parenthood Federation of America 434 West 33rd Street New York, NY 10001	None	PC	General Support	7,500
Providence After School Alliance (PASA) 81 Carpenter Street Providence, RI 02903	None	PC	General Support	250
<b>Total . . . . .</b> ▶ <b>3a</b>				9,796,028

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

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Remote Area Medical Foundation 1834 Beech Street Knoxville, TN 379202602	None	PC	Education	1,500
Saint John's Episcopol Church PO BOX 217 Ross, CA 94957	None	PC	Education	500
Salvation Army World Service Office San Rafael Corps Donation Processin g Center PO Box 60009 Prescott, AZ 863046009	None	PC	Education	300
<b>Total . . . . .</b> ▶ <b>3a</b>				9,796,028

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

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
San Domenico School 1500 Butterfield Rd San Anselmo, CA 94960	None	PC	General Support	25,000
San Francisco Education Fund 2730 Bryant Street Second Floor San Francisco, CA 94110	None	PC	Medical and health	1,000
San Francisco General Hospital Foundation PO Box 410836 San Francisco, CA 94141	None	PC	Medical and health	5,000
<b>Total . . . . .</b> ▶ <b>3a</b>				9,796,028

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Sick Kids Foundation 525 University Ave Toronto, Ontario M5G2L3 CA	None	PC	Marin	16,000
Siempre Unidos 1001 Smith Road Mill Valley, CA 94941	None	PC	Child Support	60,000
Sierra Buttes Trail Stewardship PO Box 26 Graeagle, CA 96103	None	PC	Education	18,000
<b>Total . . . . .</b> ▶ <b>3a</b>				9,796,028

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

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SKIP of New York 601 West 26th Street 5th Floor New York, NY 10001	None	PC	Underserved populations	40,000
South Kent School 40 Bulls Bridge Rd South Kent, CT 06785	None	PC	Underserved populations	1,001,000
Special Olympics 3480 Buskirk Ave Suite 340 Pleasant Hill, CA 94523	None	PC	General Support	300
<b>Total . . . . . ▶</b> <b>3a</b>				9,796,028

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
St Marks Church 85 East Main St Mount Kisco, NY 10549	None	PC	Climate Change	45,000
Stanford University 473 Via Ortega M/C 4205 Stanford, CA 94305	None	PC	Underserved populations	43,200
Stockholm Climate Change Institute Dr Rob Bailis 11 Curtis Avenue Somerville, MA 021441224	None	PC	Medical and health	90,077
<b>Total . . . . . ▶</b> <b>3a</b>				9,796,028



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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Sustainable Berea PO Box 1302 Berea, KY 40403	None	PC	Child Support	15,000
The Art Insitute of Chicago 111 South Michigan Avenue Chicago, IL 60603	None	PC	General Support	5,000
Trees Water & People 633 Remington St Fort Collins, CO 80524	None	PC	Medical and health	8,000
<b>Total . . . . .</b> ▶ <b>3a</b>				9,796,028


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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Trips for Kids138 Sunnyside Mill Valley, CA 94941	None	PC	Child Support	5,000
UCSF Foundation UCSF 220 Montgomery Street 5th Floor UCSF Box 0248 San Francisco, CA 941430248	None	PC	Medical and health	500,000
Valencia College1800 S Kirkman Rd Orlando, FL 32811	None	PC	General Support	10,000
<b>Total . . . . . ▶</b> <b>3a</b>				9,796,028

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

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
World Wildlife Fund Conservation Finance Program World Wildlife Fund 1250 24th Street NW Washington, DC 20037	None	PC	Animal welfare	2,000
Yale University Yale Univ Office of Development New Haven, CT 065212038	None	PC	Medical and health	3,000
Yale University Yale Univ Office of Development New Haven, CT 065212038	None	PC	Medical and health	368,568
<b>Total . . . . . ▶</b> <b>3a</b>				9,796,028

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Yale University Yale University 205 Prospect St Sage Hall Fl 4 New Haven, CT 06511	None	PC	Climate Change	50,000
<b>Total</b> . . . . . 				9,796,028
<b>3a</b>				

**TY 2017 Investments Corporate Stock Schedule****Name:** Overlook International Foundation Inc**EIN:** 20-1164239**Software ID:** 17005876**Software Version:** 2017v2.2

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
Equities	18,248,098	18,248,098

**TY 2017 Investments - Other Schedule****Name:** Overlook International Foundation Inc**EIN:** 20-1164239**Software ID:** 17005876**Software Version:** 2017v2.2**Investments Other Schedule 2**

<b>Category/ Item</b>	<b>Listed at Cost or FMV</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
MRYD LLC	FMV	24,529,287	24,529,287
The Overlook Partner's Fund	FMV	16,063,622	16,063,622
Overlook 3G Investments, LP	FMV	3,007,907	3,007,907

**TY 2017 Legal Fees Schedule****Name:** Overlook International Foundation Inc**EIN:** 20-1164239**Software ID:** 17005876**Software Version:** 2017v2.2

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
Legal Fees	1,221			

**TY 2017 Other Assets Schedule****Name:** Overlook International Foundation Inc**EIN:** 20-1164239**Software ID:** 17005876**Software Version:** 2017v2.2**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
Program Related Investment	25,000	25,000	25,000
Long Term Loan	13,000	5,000	5,000
Due From GOR	4,762	0	0
Short-Term Advance - Cool Effect	201	0	0



**TY 2017 Other Expenses Schedule****Name:** Overlook International Foundation Inc**EIN:** 20-1164239**Software ID:** 17005876**Software Version:** 2017v2.2**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Dues and Subscriptions	2,000			
Computer Software	202			
Rental Expense	907,065	907,065		
Other Investment Expenses	312,953	312,863		90

**TY 2017 Other Income Schedule****Name:** Overlook International Foundation Inc**EIN:** 20-1164239**Software ID:** 17005876**Software Version:** 2017v2.2**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
Other Income	390,360	390,360	

**TY 2017 Other Increases Schedule****Name:** Overlook International Foundation Inc**EIN:** 20-1164239**Software ID:** 17005876**Software Version:** 2017v2.2

<b>Description</b>	<b>Amount</b>
Book-Tax Differences in Capital Gains	2,359,359

**TY 2017 Other Liabilities Schedule****Name:** Overlook International Foundation Inc**EIN:** 20-1164239**Software ID:** 17005876**Software Version:** 2017v2.2

<b>Description</b>	<b>Beginning of Year - Book Value</b>	<b>End of Year - Book Value</b>
Due To Investments	0	68

**TY 2017 Other Professional Fees Schedule****Name:** Overlook International Foundation Inc**EIN:** 20-1164239**Software ID:** 17005876**Software Version:** 2017v2.2

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
Professional Services	12,000			
Consulting Fees	21,112			
Bank Fees	5,585		5,585	

**TY 2017 Taxes Schedule****Name:** Overlook International Foundation Inc**EIN:** 20-1164239**Software ID:** 17005876**Software Version:** 2017v2.2

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
Taxes	185,000			

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

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

OMB No 1545-0047  
**2017**

**Name of the organization**  
Overlook International Foundation Inc

**Employer identification number**  
20-1164239

**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 33<sup>1</sup> 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)

<b>Name of organization</b> Overlook International Foundation Inc	<b>Employer identification number</b> 20-1164239
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**Part I** **Contributors** (See instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Richard and Dee Lawrence 30 Evergreen Drive Kentfield, CA94939	\$ 19,085,354	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )



<b>Name of organization</b> Overlook International Foundation Inc	<b>Employer identification number</b> 20-1164239
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<b>Part II</b>	<b>Noncash Property</b> (See instructions) Use duplicate copies of Part II if additional space is needed
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(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	Securities	\$ 19,085,354	2017-12-15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

<b>Name of organization</b> Overlook International Foundation Inc	<b>Employer identification number</b> 20-1164239
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**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
_____	_____
_____	_____