990-PF 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 <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

OMB No. 1545-

0052

Open to Public Inspection

For	cale	ndar year 2019, or tax	year beginning 01-0	1-2019	, a	nd ending 12	2-31-2019	
		Indation				A Employer ide	ntification numbe	r
		AND GERSON BAKAR FOUNDATION ACHIEVE FOUNDATION				20-5691977		
		I street (or P.O. box number if mail is ERT STREET NO 400	not delivered to street address)	Room/suite		B Telephone nun	nber (see instructions	5)
20	/I I ILDI	LKI SIKLLI NO 400				(415) 576-8100		
		, state or province, country, and ZIP of	or foreign postal code			C If exemption a	application is pending	ı, check here
SAN	FRANCI	ISCO, CA 94133						
G Ch	eck al	II that apply: Initial return	Initial return of a fo	ormer public charity		D 1. Foreign org	anizations, check he	re
		Final return	Amended return				anizations meeting t here and attach con	
			nge Name change			•	ndation status was te	
		pe of organization: Section					507(b)(1)(A), check	
		4947(a)(1) nonexempt charita	_					
of y	ear (f	ket value of all assets at end from Part II, col. (c),	J Accounting method: Other (specify)	Casii V Acciu	aı		ion is in a 60-month 507(b)(1)(B), check	
line	2 16) 1	\$ 122,866,224	(Part I, column (d) must l	be on cash basis.)				
Pai	rt I	Analysis of Revenue a	nd Expenses (The	(a) Poyonus and				(d) Disbursements
		total of amounts in columns (b), (c	c), and (d) may not	(a) Revenue and expenses per	(b)	Net investment income	(c) Adjusted net income	for charitable purposes
		necessarily equal the amounts in co	• • • • • • • • • • • • • • • • • • • •	books				(cash basis only)
	1	Contributions, gifts, grants, et schedule)	tc., received (attach	441,648	2			
		Check if the foundation is	s not required to attach	441,040	,			
	2	Sch. B						
	3	Interest on savings and temp	orary cash investments	151,221	L	151,221		
	4	Dividends and interest from s	ecurities	1,144,433	3	1,144,433		
	5a	Gross rents						
le	b	Net rental income or (loss)						
	6a	Net gain or (loss) from sale of	f assets not on line 10	1,529,533	3			
Revenue	b	Gross sales price for all asset						
Sev	7	Capital gain net income (from	1,529,533 Part IV, line 2)			3,857,159		
	8	Net short-term capital gain	· · · · · ·					
	9	Income modifications						
	10a	Gross sales less returns and						
	_	allowances						
	b	Less: Cost of goods sold . Gross profit or (loss) (attach						
	С			4,046,911	1	1,020,753		
	11	Other income (attach schedul	•	7,313,746		6,173,566		
	12	Total. Add lines 1 through 11		7,313,740	,	0,173,300		0
	13	Compensation of officers, dire	, ,	450,343	2	0		450,343
S	14 15	Other employee salaries and Pension plans, employee bene	-	+50,545				+50,545
Se		Legal fees (attach schedule)		4,388	3	2,194		2,194
per	16a	Accounting fees (attach sche		9 26,336		13,168		13,168
EX	b	Other professional fees (attack	•			-,		2,100
Operating and Administrative Expenses	c 17							
rat		Taxes (attach schedule) (see		106,966	5	62,177		640
nist	18	Depreciation (attach schedule	•	2,056		0		
Ē	19 20			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Ac	21	Travel, conferences, and mee						
and	22	Printing and publications .	-		1			
19	23	Other expenses (attach sched		% 879,702	2	579,771		190,831
aţi	24	Total operating and administr	ative expenses.					
per		Add lines 13 through 23	-	1,469,791	L	657,310		657,176
0	25	Contributions, gifts, grants pa	id	5,384,701	L			5,384,701
	26	Total expenses and disbursem	ents. Add lines 24 and 25					
		0.1		6,854,492	2	657,310		6,041,877
	27	Subtract line 26 from line 12:						
	a	Excess of revenue over expensions Net investment income (if nec		459,254	1			
	b c	Adjusted net income (if negat	,			5,516,256		
			,					

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year (a) Book Value	End o	f year (c) Fair Market Value
	1	Cash—non-interest-bearing	(a) Book value	(2) Book value	(c) rail rialite value
	2	Savings and temporary cash investments	20,332,374	8,980,047	8,980,047
	3	Accounts receivable 93,730			
		Less: allowance for doubtful accounts	31,911	93,730	93,730
	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)			
		uisquainieu persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less: allowance for doubtful accounts			
	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
155	10a	Investments—U.S. and state government obligations (attach			
J		schedule)	31,105,878	44,656,613	44.656.613
	b	Investments—corporate stock (attach schedule)	31,103,070	11,030,013	11,030,013
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ►			
		Less: accumulated depreciation (attach schedule)			
	12	 Investments—mortgage loans			
			CO 120 242	60 124 050	CO 124 0F0
	13	Investments—other (attach schedule)	69,128,343	69,134,858	69,134,858
	14	Land, buildings, and equipment: basis 17,519		427	
		Less: accumulated depreciation (attach schedule) 16,543	3,032	976	976
	15	Other assets (describe			
	16	Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item I)	120,601,538	122,866,224	122,866,224
	17	Accounts payable and accrued expenses			
	17				
	18	Grants payable			
es	19	Deferred revenue			
ij	20	Loans from officers, directors, trustees, and other disqualified			
Liabilities	21	persons Mortgages and other notes payable (attach schedule)			
		· · · · ·			
	22	Other liabilities (describe			
	23	Total liabilities(add lines 17 through 22)	0	0	
		Foundations that follow FASB ASC 958, check here 🕨 🔽			
es		and complete lines 24, 25, 29 and 30.			
anc	24	Net assets without donor restrictions	120,601,538	122,866,224	
Net Assets or Fund Balances	25	Net assets with donor restrictions			
nuc		Formation when the market is propriete and the second seco			
F		Foundations that do not follow FASB ASC 958, check here			
0 9		and complete lines 26 through 30.			
sets	26	Capital stock, trust principal, or current funds			
ASS	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
et	28	Retained earnings, accumulated income, endowment, or other funds			
Z	29	Total net assets or fund balances (see instructions)	120,601,538	122,866,224	
	30	Total liabilities and net assets/fund balances (see instructions) .	120,601,538	122,866,224	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
1		I net assets or fund balances at beginning of year—Part II, column (a),			120 601 520
•		of-year figure reported on prior year's return)		. 1	120,601,538
2 3		r amount from Part I, line 27a —	459,254 1,805,432
4		lines 1, 2, and 3			122,866,224
5		reases not included in line 2 (itemize)		5	0
6		I not accets or fund halances at end of year (line 4 minus line 5)—Part	II column (h) line 2	6	122 866 224

(d)

Distribution ratio

(col. (b) divided by col. (c))

0.052747

0.039209

0.031611

0.031975

0.044905

0.200447

0.040089

5,170,129

5,225,292

6,041,877

Form **990-PF** (2019)

55,163

128,966,273

	<u> </u>					
		nd(s) of property sold (e.g., e; or common stock, 200 sh		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a	PORTFOLIO GAIN/LOSS			Р		
	PARTNERSHIP GAIN/LOSS			Р		
	DISPOSITION OF WATERSH	ED CAPITAL INSTITUTIO	NAL PARTNERS, LP	Р		
d			,			
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or o	(g) other basis ense of sale	Gain o	h) or (loss) on minus (g)
а	1,523,717					1,523,71
ь	2,327,626					2,327,62
С	5,816					5,81
d						
е						
С	omplete only for assets showin	g gain in column (h) and ow	vned by the foundatior	n on 12/31/69	((I)
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) of col. (i) . (j), if any	col. (k), but not	h) gain minus less than -0-) or om col.(h))
a					1,523	
b						2,327,62
c						5,81
d						
e						
2	Capital gain net income or (r	100	If gain, also enter in P If (loss), enter -0- in	' III	2	3,857,159
<u>2</u> 3	Net short-term capital gain o	or (loss) as defined in section	ons 1222(5) and (6):			
	If gain, also enter in Part I, li in Part I, line 8		uctions). If (loss), ente	3.0	3	
Pari	-V Qualification Unde	er Section 4940(e) for	· Deduced Tay on	Net Investme	nt Income	
						_
(FOF 0	ptional use by domestic private	e roundations subject to the	e section 4940(a) tax (on het investment	ilicome.)	
If sect	tion 4940(d)(2) applies, leave	this part blank.				
	ne foundation liable for the sec s," the foundation does not qua				eriod?	Yes V No
_		- 1 - 1				

Net value of noncharitable-use assets

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

113,344,299

127,341,634

94,307,858

64,775,578

38,724,420

4

5

6

7

8

Adjusted qualifying distributions

(a)

Base period years Calendar

year (or tax year beginning in)

2018

2017

2016 2015

2014

2 Total of line 1, column (d)

5 Multiply line 4 by line 3

7 Add lines 5 and 6

instructions.

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

5,978,598

4,992,925

2,981,143

2,071,191

1,738,915

3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by

the number of years the foundation has been in existence if less than 5 years

4 Enter the net value of noncharitable-use assets for 2019 from Part X, line.5.

6 Enter 1% of net investment income (1% of Part I, line 27b)

8 Enter qualifying distributions from Part XII, line 4,

	Located at 201 FILBERT STREET NO 400 SAN FRANCISCO CA ZIP+4			
	94133			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here			>
	and enter the amount of tax-exempt interest received or accrued during the year		-	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over	,	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the			
Day	foreign			
Pal	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required		V	NI-
1-	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
14	During the year did the foundation (either directly or indirectly): (1) Engage in the sale or exchange or leasing of property with a disgualified person?			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	(2) 5 the section of citizents (consent the citizents) at the citizents are sections.			
	Tes I No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No No			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days.) Yes Vo			
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	1b		No
	Organizations relying on a current notice regarding disaster assistance check here			
С	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 2019?	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)):			
а	At the end of tax year 2019, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2019?			
	If "Yes," list the years 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.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	▶ 20 <u> </u>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period?(<i>Use Schedule C, Form 4720, to determine</i>			
	if the foundation had excess business holdings in 2019.).	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	Al-		N-
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b 990-	DF /	No
	Form	・フラリー	TT (2	∠UI9)

and Contractors (continued)		
3 Five highest-paid independent contractors for professional services	(see instructions). If none, enter "NON	NE".
(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		
ist the foundation's four largest direct charitable activities during the tax year. Include rel organizations and other beneficiaries served, conferences convened, research papers proc		r of Expenses
1 NONE	Juceu, etc.	. 0
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		
		7

С	Fair market value of all other assets (see instructions)	1c	113,885,201
d	Total (add lines 1a, b, and c)	1d	130,930,226
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
_		_	100 000 000

d	Total (add lines 1a, b, and c)	1d	130,930,2
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
	Acquisition indebtedness applicable to line 1 assets	2	
	Subtract line 2 from line 1d. '. '. '. '. '. '	3	130,930,2
		,	

	1c (attach detailed explanation) 1e 0		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	130,930,22
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	1,963,95
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4.	5	128 966 27

3	Subtract line 2 from line 1d	3	130,930,226	
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see			
	instructions)	4	1,963,953	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	128,966,273	
6	Minimum investment return. Enter 5% of line 5	6	6,448,314	
	Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating foundations and certain foreign			

3	Subtract fille 2 from fille 1d	3	130,930,220
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	1,963,953
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	128,966,273
6	Minimum investment return. Enter 5% of line 5	6	6,448,314
	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation	ns and	certain foreign
Pai	organizations check here and do not complete this part.)		

2a

2b

6,448,314

55,163

6,393,151

6,393,151

6,393,151

6,041,877

6,041,877

5,986,714

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55,163

55,163

2c

3

4

5

6

7

1a

1b

2

За

3b 4

5

6

Distributable amount before adjustments. Subtract line 2c from line 1.

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

income. Enter 1% of Part I, line 27b. See instructions.

Adjusted qualifying distributions. Subtract line 5 from line 4.

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Tax on investment income for 2019 from Part VI, line 5.

Recoveries of amounts treated as qualifying distributions.

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

the section 4940(e) reduction of tax in those years.

Income tax for 2019. (This does not include the tax from Part VI.)

1

2a

3

4

5

6

7

1

2

3

5

6

Part XII

Form 990-PF (2019) Part XIII Undistributed Income (see instr	ructions)			Page 9
Part XIII Undistributed Income (see instr	(a)	(b)	(c)	(4)
	Corpus	Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				6,393,151
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only			5,478,384	
b Total for prior years: 20, 20, 20		0		
3 Excess distributions carryover, if any, to 2019:				
a From 2014				
b From 2015				
d From 2017				
e From 2018				
f Total of lines 3a through e	0			
4 Qualifying distributions for 2019 from Part				
XII, line 4: \$				
a Applied to 2018, but not more than line 2a			5,478,384	
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 2019 distributable amount				563,493
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2019.	0			0
(If an amount appears in column (d), the				
same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
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 2018. Subtract line 4a from line 2a. Taxable amount—see			0	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				5,829,658
be distributed in 2020				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may	0			
be required - see instructions)				
applied on line 5 or line 7 (see instructions)	0			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	0			
10 Analysis of line 9:				
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				
d Excess from 2018				
e Excess from 2019				
			F	orm 990-PF (2019)

	alternative test relied upon:			
а	"Assets" alternative test—enter:			
	(1) Value of all assets			
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)			
ь	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed			
С	"Support" alternative test—enter:			
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)			
	(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			

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

ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) BARBARA BASS BAKAR

Supplementary Information (Complete this part only if the foundation had \$5,000 or more in

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

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

assets at any time during the year—see instructions.)

Check here $\blacktriangleright
olimits
olimits$ if the foundation only makes contributions to preselected charitable organizations and does not accept

from an exempt organization (4) Gross investment income

c Any submission deadlines:

Part XV

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:

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

•

РС

РС

PС

РС

РС

РС

NONE

NONE

NONE

NONE

NONE

NONE

NONE

GENERAL SUPPORT

GENERAL SUPPORT

GENERAL SUPPORT

TUITION EXPENSES

STUDENT SCHOLARSHIP

STUDENT SCHOLARSHIP

STUDENT SCHOLARSHIP

STUDENT SCHOLARSHIP

STUDENT SCHOLARSHIP

STUDENT SCHOLARSHIP

TUITION EXPENSES

TUITION EXPENSES

REIMBURSEMENT

REIMBURSEMENT

STUDENT SCHOLARSHIP

500

2,000

50,000

5,000

304,751

1,935

2,000

2,500

2,000

157,156

15,000

6,500

191,039

HABITAT FOR HUMANITY

4660 HARBORD DRIVE OAKLAND, CA 94618 HOLY NAMES HIGH SCHOOL

4660 HARBORD DRIVE

OAKLAND, CA 94618 JOSHUA CADENAS

JOSHUA DUENAS

LOUIE MEZIE

3250 19TH AVE

NICHOLAS NIDO

201 FILBERT STREET NO 400 SAN FRANCISCO,CA 94133

201 FILBERT STREET NO 400 SAN FRANCISCO,CA 94133 KAYLIANNA CADENA

201 FILBERT STREET NO 400 SAN FRANCISCO, CA 94133

201 FILBERT STREET NO 400 SAN FRANCISCO,CA 94133 MERCY HIGH SCHOOL

SAN FRANCISCO, CA 94132

201 FILBERT STREET NO 400 SAN FRANCISCO,CA 94133

201 FILBERT STREET NO 400 SAN FRANCISCO, CA 94133

NOTRE DAME HIGH SCHOOL

NESTOR OROZCO-LLAMAS

SAINT HELENA, CA 94612

201 FILBERT STREET NO 400 SAN FRANCISCO,CA 94133 HEBREW FREE LOAN

131 STEUART STREET SUITE 520 SAN FRANCISCO, CA 94105 HOLY NAMES HIGH SCHOOL

2619 BROADWAY

HARRICK WU

1540 RALSTON AVE			REIMBURSEMENT	
BELMONT,CA 94002				
OAKLAND MUSEUM OF CALIFORNIA		P C	GENERAL SUPPORT	100,000
1000 OAK STREET				
OAKLAND,CA 94607				
SAN FRANCISCO MARIN FOOD BANK		P C	CAPITAL CAMPAIGN	1,000,000
900 PENNSYLVANIA				
SAN FRANCISCO, CA 94103				
SAN FRANCISCO PLAYHOUSE		PC	GENERAL SUPPORT	100,000
588 SUTTER STREET 318				
SAN FRANCISCO, CA 94102	 			10.000
SHANTI PROJECT		P C	GENERAL SUPPORT	10,000
3170 23RD STREET				
SAN FRANCISCO, CA 94110	 			F0.000
SMITH COLLEGE 33 ELM STREET		P C	SCHOLARSHIPS	50,000
NORTHAMPTON, MA 01063				
SOFIA ORTEGA-GUERRERO	NONE	I	STUDENT SCHOLARSHIP	2,000
201 FILBERT STREET NO 400	NONE	1	STUDENT SCHOLARSHIP	2,000
SAN FRANCISCO, CA 94133				
TERESA ASCENCIO	NONE	T	STUDENT SCHOLARSHIP	2,500
201 FILBERT STREET NO 400	NONE	1	STODENT SCHOLAGE.	_,,,,
SAN FRANCISCO, CA 94133				
THE SAINT HELENA FORUM	1	PC	GENERAL SUPPORT	12,500
2480 SPRING MOUNTAIN ROAD				
SAINT HELENA, CA 94574				
UC BERKELEY FOUNDATION		PC	ASHOK G. PROJECT STOP	78,750
2080 ADDISON STREET 4200			LEAD PIPES FROM	
BERKELEY,CA 94720			LEACHING IN DRINKING	
	<u> </u>		H 2 O	<u> </u>
UCSF FOUNDATION		PC	RESEARCH GRANTS	500,000
UCSF BOX 45339				
SAN FRANCISCO, CA 94145				- 204 - 704
Total	<u> </u>	<u></u>	> 3a	5,384,701
b Approved for future payment				
Total			 ▶ 3b	0
100011111111111111111111111111111111111	· · · · · · · · · · · · · · · · · · ·	· · · · ·		Form 990-PF (2019)
				101111 330 11 (2013)

Enter gross amounts unless otherwise indicated.		Unrelated b	usiness income	Excluded by section	(e) Related or exemp		
1 Progran	n service revenue:	(a) Business code (b) Amount		(c) Exclusion code	(d) Amount	function income (See instructions.)	
a		code				,	
b							
	and contracts from government agencies						
_	ership dues and assessments						
	st on savings and temporary cash			14	151,221		
4 Divider	nds and interest from securities						
				14	1,144,433		
	ntal income or (loss) from real estate:						
	-financed property lebt-financed property						
	ntal income or (loss) from personal						
property	, ,						
	nvestment income			14	4,046,911		
8 Gain or	r (loss) from sales of assets other than			10	1,529,533		
	ome or (loss) from special events:			18	1,529,533		
	profit or (loss) from sales of inventory						
	revenue: a						
b							
					6,872,098		
12 Subtot							
	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)						
13 Total. (See w	Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify ca	lculations.)		13	3		
13 Total. (See w	Add line 12, columns (b), (d), and (e). orksheet in line 13 instructions to verify ca -B Relationship of Activities to		olishment of E	xempt Purpose	3 es	6,872,098	
13 Total. (See w	Add line 12, columns (b), (d), and (e). orksheet in line 13 instructions to verify call and the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity for which accomplishment of the foundation which accomplish the foundati	the Accomp	olishment of E	Exempt Purpose a) of Part XVI-A con	3 es tributed importan	6,872,098 tly to	
13 Total. (See w Part XVI	Add line 12, columns (b), (d), and (e). orksheet in line 13 instructions to verify called Relationship of Activities to Explain below how each activity for which	the Accomp	olishment of E	Exempt Purpose a) of Part XVI-A con	3 es tributed importan	6,872,098 tly to	
13 Total. (See w Part XVI	Add line 12, columns (b), (d), and (e). orksheet in line 13 instructions to verify call and the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity for which accomplishment of the foundation which accomplish the foundati	the Accomp	olishment of E	Exempt Purpose a) of Part XVI-A con	3 es tributed importan	6,872,098 tly to	
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13 Total. (See w Part XVI	Add line 12, columns (b), (d), and (e). orksheet in line 13 instructions to verify call and the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity for which accomplishment of the foundation which accomplish the foundati	the Accomp	olishment of E	Exempt Purpose a) of Part XVI-A con	3 es tributed importan	6,872,098 tly to	
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13 Total. (See w Part XVI	Add line 12, columns (b), (d), and (e). orksheet in line 13 instructions to verify call and the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which accomplishment of the foundation's explain below how each activity for which accomplishment of the foundation's explain the foundation is a few forms.	the Accomp	olishment of E	Exempt Purpose a) of Part XVI-A con	3 es tributed importan	6,872,098 tly to	

	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations
the orgai	nization directly or indirectly engage in any of the following with any other organization described in

Part XVII	Noncharitable Exemp	t Organizations					
	ganization directly or indirectly 01(c) (other than section 501(c	engage in any of the following	•	_		Yes	No
	from the reporting foundation to		_	,			
					1a(1)		No
• •	rassets				1a(2)		No
b Other tran							
	of assets to a noncharitable ex	kempt organization			1b(1)		No
	lases of assets from a nonchari				1b(2)		No
	al of facilities, equipment, or ot				1b(3)		No
	bursement arrangements				1b(4)		No
(5) Loans	s or loan guarantees				1b(5)		No
(6) Perfor	mance of services or members	nip or fundraising solicitations			1b(6)		No
	facilities, equipment, mailing				1c		No
of the goo	wer to any of the above is "Yes, ds, other assets, or services gin esaction or sharing arrangemen	ven by the reporting foundation	n. If the foundation	on received less than fair mark	et value	ıe	
(a) Line No.	(b) Amount involved (c) Name	of noncharitable exempt organization	n (d) Descript	ion of transfers, transactions, and sha	ring arrang	gement	.S
25 Ic the four	l ndation directly or indirectly aff	iliated with or related to one	or more tay even	ant organizations			
	in section 501(c) (other than			_	ΠNο		
	. , .	. , . , ,	11 327:		<u> </u>		
b If "Yes," C	omplete the following schedule (a) Name of organization	(b) Type of organ	nization	(c) Description of relation	onchin		
	(a) Name of organization	(b) Type of organ	lization	(C) Description of relation	лыпр		
the b	er penalties of perjury, I declare pest of my knowledge and belief mation of which preparer has a	, it is true, correct, and comple					
Here L		2020-11-1	.6	May th	e IRS discus	s this re	eturn
	Signature of officer or trustee	Data	Title	with th	ne preparer sh	hown be	low
^s	Signature of officer or trustee	Date	Title	(see in	str.) Yes	No	
•	Print/Type preparer's name	Preparer's Signature	Date	PTIN			
			2 3 1 0	Check if self-	P00966	101	
	JOAN S MCMAHON			employed 🕨	FUU966	494	
Paid	JOAN S FICHATION						
Preparer	Firm's name DELOITTE T	AXIIP	1	Firm's	FIN > 86	5-106	55772

Use Only

Firm's address ▶ 555 MISSION STREET

SAN FRANCISCO, CA 94105

Phone no.

(415) 783-4000

Form **990-PF** (2019)

Additional Data Return to Form Software ID: Software Version: Form 990PF - Special Condition Description: **Special Condition Description**

Schedule B Schedule of Contributors (Form 990, 990-EZ, or 990-PF) Attach to Form 990, 990-EZ, or 990-PF. Department of the Treasury Go to www.irs.gov/Form990 for the latest information. Internal Revenue Service

2019

OMB No. 1545-0047

Name of the organization **Employer identification number** BARBARA AND GERSON BAKAR FOUNDATION DBA THE ACHIEVE FOUNDATION 20-5691977 Organization type (check one):

Filers of:
Form 990 or 990-EZ

Section:

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

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.

Form 990-PF

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

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).

BARBARA AND G DBA THE ACHIE Part I Contributors	990, 990-EZ, or 990-PF) (2019)	Employer id	Page 2
	ERSON BAKAR FOUNDATION	20-569197	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RICHARD ROSENBERG 955 GREEN STREET 5	\$ 15 000	Person Payroll
	SAN FRANCISCO, C A 94133	\$ 15,000	Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ONE ROBERT S DRIVE	\$ 30,000	Person Payroll Noncash
(a)	MENLO PARK, C A 94025 (b)	(c)	(Complete Part II for noncash contributions.)
No.	Name, address, and ZIP + 4 JAY M BASS	Total contributions	Type of contribution Person
<u>u</u>	MIAMI BEACH, FL 33140	\$ 5,000	Payroll Noncash
(a)	(b)	(c)	(Complete Part II for noncash contributions.) (d)
No. <u>4</u>	Name, address, and ZIP + 4 JEAN ANN DOUGLAS 600 EL CAMINO DEL MAR	Total contributions	Type of contribution ✓ Person Payroll
	SAN FRANCISCO, C A 94121	\$ 5,000	Noncash (Complete Part II for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	contributions.) (d) Type of contribution
<u>5</u>	KLINT KIRKCONNELL 12265 EL CAMINO REAL 150	\$ 5 500	Person Payroll
	SAN DIEGO, C A 92130	\$ 5,500	Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4 LESTER FAMILY FOUNDTION	(c) Total contributions	(d) Type of contribution ✓ Person
<u>6</u>	1140 WALL STREET UNIT 2089	\$ 40,000	Person Payroll Noncash
	LA JOLLA, C A 92038		(Complete Part II for noncash contributions.)
	ERSON BAKAR FOUNDATION		orm 990, 990-EZ, or 990-PF) (2019) entification number 7
Part I Contributors	Contributors (see instructions). Use duplicate copies of Part I if additional space		
(a) No.	(b) Name, address, and ZIP + 4 LINDA ZELLER	(c) Total contributions	(d) Type of contribution ✓ Person
7	101 LOMBARD STREET 101W SAN FRANCISCO, CA 94111	\$ 10,000	Payroll Noncash
(a)	(b)	(c)	(Complete Part II for noncash contributions.)
No. 8	Name, address, and ZIP + 4 M ARTHUR GENSLER JR	Total contributions	Type of contribution Person
-	45 FREMONT STREET SUITE 1500 SAN FRANCISCO, CA 94105	\$ 10,000	Payroll Noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(Complete Part II for noncash contributions.) (d) Type of contribution
9	MARY VAUGHAN LESTER 2200 RALSTON AVENUE	Total Contributions	Person Payroll
	HILLSBOROUGH, C A 94010	\$ 45,000	Noncash (Complete Part II for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	contributions.) (d) Type of contribution
<u>10</u>	MARYELLEN FRANK HERRINGER 90 SEA VIEW AVENUE	6.40.000	Person Payroll
	PIEDMONT, C A 94611	\$ 10,000	Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution ✓ Person
<u>11</u>	MICHAEL AND CATHERINE PODELL 2200 RALSTON AVENUE	\$ 75,000	Person □ Payroll □ Noncash
	HILLSBOROUGH, C A 94010		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4 NANCY AND GEOFFREY STACK FAMILY FOUNDATION	(c) Total contributions	(d) Type of contribution ✓ Person
<u>12</u>	18802 BARDEEN AVENUE	\$ 25,000	Payroll Noncash
	IRVINE, C A 92612	Schedule B (Fo	(Complete Part II for noncash contributions.)
DBA THE ACHIE	ion ERSON BAKAR FOUNDATION VE FOUNDATION	Employer id 20-569197	entification number 7
Part I Contributors (a)	Contributors (see instructions). Use duplicate copies of Part I if additional space	e is needed.	(d)
<u>No.</u>	Name, address, and ZIP + 4 ORANGE COUNTY COMMUNITY FOUNDATION	Total contributions	Type of contribution Person
	ORANGE, C A 92868	\$ 10,563	Payroll Noncash (Complete Part II for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	contributions.) (d) Type of contribution
14	PLC PHILANTHROPIC SERVICES LLC 1485 SANSOME STREET		✓ Person Payroll
	SAN FRANCISCO, C A 94111	\$ 5,000	Noncash (Complete Part II for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	contributions.) (d) Type of contribution
<u>15</u>	SAN FRANCISCO GENERAL HOSPITAL FOUNDATION 2789 25TH STREET 2028	\$ 7,500	Person Payroll
	SAN FRANCISCO, CA 94110		Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution ✓ Person
<u>16</u>	STEPHEN LOPRESTI 10 INVERLEITH TERRACE MORAGE, C A 94556	\$ 5,000	Payroll Noncash
(a)	(b)	(c)	(Complete Part II for noncash contributions.)
No.	Name, address, and ZIP + 4 TEL CONNECTIVITY LTD	Total contributions	Type of contribution ✓ Person
-	6900 PASEO PADRE PARKWAY	\$ 5,375	Payroll Noncash (Complete Part II for passage)
	FREMONT, C A 94555		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d)
	(b)	Total contributions	
No.	(b) Name, address, and ZIP + 4 THE SHAPIRO FAMILY CHARITABLE FOUNDATION		(d) Type of contribution Person Payroll Noncash (Complete Part II for noncash
No. 18 Name of organizat	(b) Name, address, and ZIP + 4 THE SHAPIRO FAMILY CHARITABLE FOUNDATION 1221 OCEAN AVENUE APT 903 SANTA MONICA, C A 90401	\$ 10,000 Schedule B (Fo	(d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) prm 990, 990-EZ, or 990-PF) (2019) entification number
No. 18 Name of organizat BARBARA AND GDBA THE ACHIE	(b) Name, address, and ZIP + 4 THE SHAPIRO FAMILY CHARITABLE FOUNDATION 1221 OCEAN AVENUE APT 903 SANTA MONICA, C A 90401 ion ERSON BAKAR FOUNDATION	Schedule B (Fo	(d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) prm 990, 990-EZ, or 990-PF) (2019) entification number
No. 18 Name of organizat BARBARA AND GDBA THE ACHIE	(b) Name, address, and ZIP + 4 THE SHAPIRO FAMILY CHARITABLE FOUNDATION 1221 OCEAN AVENUE APT 903 SANTA MONICA, CA 90401 ion ERSON BAKAR FOUNDATION VE FOUNDATION Contributors (see instructions). Use duplicate copies of Part I if additional space (b) Name, address, and ZIP + 4	Schedule B (Fo	(d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) orm 990, 990-EZ, or 990-PF) (2019) entification number 7
Name of organizat BARBARA AND G DBA THE ACHIE Part I Contributors (a)	(b) Name, address, and ZIP + 4 THE SHAPIRO FAMILY CHARITABLE FOUNDATION 1221 OCEAN AVENUE APT 903 SANTA MONICA, C A 90401 ion ERSON BAKAR FOUNDATION VE FOUNDATION Contributors (see instructions). Use duplicate copies of Part I if additional space	Schedule B (For Employer ide 20 - 569197) e is needed. (c) Total contributions	(d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) prim 990, 990-EZ, or 990-PF) (2019) entification number (d) Type of contribution Person Payroll
No. 18 Name of organizat BARBARA AND GDBA THE ACHIE Part I Contributors (a) No.	(b) Name, address, and ZIP + 4 THE SHAPIRO FAMILY CHARITABLE FOUNDATION 1221 OCEAN AVENUE APT 903 SANTA MONICA, C A 90401 ion ERSON BAKAR FOUNDATION VE FOUNDATION Contributors (see instructions). Use duplicate copies of Part I if additional space (b) Name, address, and ZIP + 4 UCSF HEALTH FOR INTERNSHIP	Schedule B (Fo 20 - 569197) e is needed.	(d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) prm 990, 990-EZ, or 990-PF) (2019) entification number 7 (d) Type of contribution Person
No. 18 Name of organizat BARBARA AND GDBA THE ACHIE Part I Contributors (a) No.	(b) Name, address, and ZIP + 4 THE SHAPIRO FAMILY CHARITABLE FOUNDATION 1221 OCEAN AVENUE APT 903 SANTA MONICA, C A 90401 ion ERSON BAKAR FOUNDATION VE FOUNDATION Contributors (see instructions). Use duplicate copies of Part I if additional space (b) Name, address, and ZIP + 4 UCSF HEALTH FOR INTERNSHIP 505 PARNASSUS AVENUE	Schedule B (For Employer ide 20 - 569197) e is needed. (c) Total contributions	(d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) prm 990, 990-EZ, or 990-PF) (2019) entification number 7 (d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (d) Type of contribution
No. Name of organizate BARBARA AND GODBA THE ACHIE Part I Contributors (a) No. 19	(b) Name, address, and ZIP + 4 THE SHAPIRO FAMILY CHARITABLE FOUNDATION 1221 OCEAN AVENUE APT 903 SANTA MONICA, C A 90401 ion ERSON BAKAR FOUNDATION VE FOUNDATION Contributors (see instructions). Use duplicate copies of Part I if additional space (b) Name, address, and ZIP + 4 UCSF HEALTH FOR INTERNSHIP 505 PARNASSUS AVENUE SAN FRANCISCO, C A 94143 (b) Name, address, and ZIP + 4	Schedule B (For Employer ide 20 - 569197) e is needed. (c) Total contributions \$ 10,380	(d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) prem 990, 990-EZ, or 990-PF) (2019) entification number (d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (d)
Name of organizate BARBARA AND GOBA THE ACHIE Part I Contributors (a) No. 19 (a) No.	(b) Name, address, and ZIP + 4 THE SHAPIRO FAMILY CHARITABLE FOUNDATION 1221 OCEAN AVENUE APT 903 SANTA MONICA, C A 90401 ion ERSON BAKAR FOUNDATION VE FOUNDATION Contributors (see instructions). Use duplicate copies of Part I if additional space (b) Name, address, and ZIP + 4 UCSF HEALTH FOR INTERNSHIP 505 PARNASSUS AVENUE SAN FRANCISCO, C A 94143 (b) Name, address, and ZIP + 4 UNITED WAY 550 KEARNY STREET SUITE 1000 SAN FRANCISCO, C A 94108	Schedule B (For Employer ide 20 - 569197) e is needed. (c) Total contributions \$ 10,380 (c) Total contributions	(d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) printification number (d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.)
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No. 18 Name of organizate BARBARA AND GENERAL DESCRIPTION No. 19 (a) No. 20	(b) Name, address, and ZIP + 4 THE SHAPIRO FAMILY CHARITABLE FOUNDATION 1221 OCEAN AVENUE APT 903 SANTA MONICA, C A 90401 ion ERSON BAKAR FOUNDATION VE FOUNDATION Contributors (see instructions). Use duplicate copies of Part I if additional space (b) Name, address, and ZIP + 4 UCSF HEALTH FOR INTERNSHIP 505 PARNASSUS AVENUE SAN FRANCISCO, C A 94143 (b) Name, address, and ZIP + 4 UNITED WAY 550 KEARNY STREET SUITE 1000 SAN FRANCISCO, C A 94108 (b) Name, address, and ZIP + 4 UNIVERSITY OF CALIFORNIA BERKELEY 2080 ADDISON STREET 4200	Schedule B (For Employer ide 20 - 569197) e is needed. (c) Total contributions \$ 10,380 (c) Total contributions \$ 13,009	(d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) prim 990, 990-EZ, or 990-PF) (2019) entification number (d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (d) Type of contribution Person Payroll Noncash Noncash Noncash
No. 18 Name of organizate BARBARA AND GODBA THE ACHIE Part I Contributors (a) No. 19 (a) No. 20 (a) No.	(b) Name, address, and ZIP + 4 THE SHAPIRO FAMILY CHARITABLE FOUNDATION 1221 OCEAN AVENUE APT 903 SANTA MONICA, C A 90401 SANTA MONICA, C A 90401 Contributors (see instructions). Use duplicate copies of Part I if additional space (b) Name, address, and ZIP + 4 UCSF HEALTH FOR INTERNSHIP 505 PARNASSUS AVENUE SAN FRANCISCO, C A 94143 (b) Name, address, and ZIP + 4 UNITED WAY 550 KEARNY STREET SUITE 1000 SAN FRANCISCO, C A 94108 (b) Name, address, and ZIP + 4 UNIVERSITY OF CALIFORNIA BERKELEY 2080 ADDISON STREET 4200 BERKELEY, C A 94720 (b)	Schedule B (For Employer ide 20 - 569197) e is needed. (c) Total contributions (c) Total contributions \$ 10,380 (c) Total contributions \$ 22,725	(d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) Person Payroll Noncash (Complete Part II for noncash contributions) Person Payroll Noncash (Complete Part II for noncash contributions.) (d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (d) Type of contribution (complete Part II for noncash contributions.)
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(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
· =		<u> </u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
- =		<u> </u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
- =		<u> </u>	
(a)	(b)	(c)	(d)

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

Schedule E	3 (Form 990, 990-EZ, or 990-PF) (2019)		Page 4
BARBARA	rganization AND GERSON BAKAR FOUNDATION ACHIEVE FOUNDATION		Employer identification number 20-5691977
Part III	total more than \$1,000 for the year from a	ny one contributor. Con Part III, enter the total of nformation once. See in	ns described in section 501(c)(7), (8), or (10) that aplete columns (a) through (e) and the following exclusively religious, charitable, etc., contributions structions.) \$
(a) No. from Part I	(b) Purpose of gift	(c) Use of gif	t (d) Description of how gift is held
-	Transferee's name, address, and ZIF	(e) Transfer of	gift Relationship of transferor to transferee
(a) No. from			
No. from Part I	(b) Purpose of gift	(c) Use of gif	t (d) Description of how gift is held
-	Transferee's name, address, and ZIF	(e) Transfer of	gift Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	c) Use of gif	t (d) Description of how gift is held
-	Transferee's name, address, and ZIF	(e) Transfer of	gift Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gif	t (d) Description of how gift is held
-	Transferee's name, address, and ZIF	(e) Transfer of	gift Relationship of transferor to transferee
			Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

TY 2019 IRS 990 e-File Render

ACCOUNTING FEES

Name: BARBARA AND GERSON BAKAR FOUNDATION DBA THE ACHIEVE FOUNDATION

13,168

13,168

EIN: 20-5691977					
Category	Amount	Net Investment	Adjusted Net		

Income ıncome

26,336

Disbursements for Charitable **Purposes**

2015-08-20

2015-10-21

COMPUTER

COMPUTER

Name: BARBARA AND GERSON BAKAR FOUNDATION

DBA THE ACHIEVE FOUNDATION

130 SL

266

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

ETN: 20-5601077

196

420

		ETIV.	20 3031377						
Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
COMPUTER	2015-03-23	2,190	1,760	SL	5.000000000000	430	0		
COMPUTER	2015-07-21	7,517	5,135	SL	5.000000000000	1,503	0		

5.000000000000

5.000000000000

84

TY 2019 IRS 990 e-File Render

EATON PARK OVERSEAS FUND

STEADFAST INTERNATIONAL LTD

SANDS CAPITAL EMERGING MARKETS

TACONIC OPPORTUNITIES FUND OFFSHORE

Name: BARBARA AND GERSON BAKAR FOUNDATION

DBA THE ACHIEVE FOUNDATION

End of Year Fair Market Value

26,341,111

4,065,735

7,584,785

6,658,682

6,300

26,341,111

4,065,735

7,584,785

6,658,682

6,300

EIN: 20-5691977

Name of Stock	End of Year Book Value

DODGE & COX GLOBAL FUND

TY 2019 IRS 990 e-File Render

Name: BARBARA AND GERSON BAKAR FOUNDATION

DBA THE ACHIEVE FOUNDATION

FTN: 20-5691977

INVESTMENT IN PARTNERSHIPS

EIN: 20-56919//			
Category/ Item	Listed at Cost or FMV	Book Value	End of Ye Fair Mark Value

AT COST

69,134,858

69,134,858

TY 2019 IRS 990 e-File Render

COMPUTER

COMPUTER

Name: BARBARA AND GERSON BAKAR FOUNDATION

DBA THE ACHIEVE FOUNDATION

EIN: 20-5691977

	Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
	COMPUTER	2,190	2,190	0	
ı	COMPUTER	7.517	6.638	879	

196

420

169

350

70

TY 2019 IRS 990 e-File Render

Name: BARBARA AND GERSON BAKAR FOUNDATION

DBA THE ACHIEVE FOUNDATION

EIN: 20-5691977					
Category	Amount	Net Investment	Adjusted Net		

Income Income

2,194

Disbursements for Charitable **Purposes**

LEGAL FEES 4,388 2,194

TY 2019 IRS 990 e-File Render

Description

PUBLICATION/ PROMOTION

PORTFOLIO MANAGEMENT

SUMMER INTERNSHIP PROGRAM

Name: BARBARA AND GERSON BAKAR FOUNDATION

Net Investment

Income

38,592

Adjusted Net

Income

Disbursements for

826

82,726

DBA THE ACHIEVE FOUNDATION

EIN: 20-5691977

Revenue and

Evnenses per Rooks

	Expenses per books	Income	Income	Charitable Ful poses
PARTNERSHIP EXPENSES	650,279	541,179		0
ACHIEVE PROGRAM EXPENSES	93,802	0		93,802
OFFICE SUPPLIES, POSTAGE AND SHIPPING	5,991	0		5,991
INSURANCE	1,242	0		1,242
MISCELLANEOUS EXPENSE	5,043	0		5,043
CONTINUING EDUCATION	1.201	0		1.201

826

38,592

82,726

TY 2019 IRS 990 e-File Render

PARTNERSHIP INCOME

Name: BARBARA AND GERSON BAKAR FOUNDATION DRA THE ACHIEVE FOUNDATION

	DB/(THE / CHIEVE I COND/(TON
EIN:	20-5691977

4,046,911

1,020,753

4,046,911

EI	N: 20-5691977	

Description **Net Investment Adjusted Net** Revenue And Expenses Per Books Income **Income**

TY 2019 IRS 990 e-File Render Name: BARBARA AND GERSON BAKAR FOUNDATION

DBA THE ACHIEVE FOUNDATION

EIN: 20-5691977

Amount

UNREALIZED GAIN/LOSS

Description

1,805,432

TY 2019 IRS 990 e-File Render

FEDERAL EXCISE TAX

STATE FILING FEE

Name: BARBARA AND GERSON BAKAR FOUNDATION

640

DBA THE ACHIEVE FOUNDATION

EIN: 20-5691977

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAX	31,326	62,177		0

75,000

640