

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

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation
 ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No 1545-0052
2018
Open to Public Inspection

For calendar year 2018, or tax year beginning 01-01-2018 , and ending 12-31-2018

Name of foundation SOCIUS FOUNDATION		A Employer identification number 46-3951294	
Number and street (or P O box number if mail is not delivered to street address) 180 HOWARD STREET STE 205		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code SAN FRANCISCO, CA 94105		B Telephone number (see instructions) (415) 456-4000	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change		C If exemption application is pending, check here <input type="checkbox"/> D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation			
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ <u>117,533</u>		J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	70,421			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)	31,807				
12 Total. Add lines 1 through 11	102,228	0			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	2,225			
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)				
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	1,278			
	24 Total operating and administrative expenses. Add lines 13 through 23	3,503	0		
	25 Contributions, gifts, grants paid	98,325			98,325
26 Total expenses and disbursements. Add lines 24 and 25	101,828	0		98,325	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	400				
b Net investment income (if negative, enter -0-)		0			
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	265,944	117,533	117,533
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____	1,000		
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	266,944	117,533	117,533	
Liabilities	17 Accounts payable and accrued expenses	232,446	82,635	
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	232,446	82,635	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	34,498	34,898	
	28 Paid-in or capital surplus, or land, bldg , and equipment fund			
29 Retained earnings, accumulated income, endowment, or other funds				
30 Total net assets or fund balances (see instructions)	34,498	34,898		
31 Total liabilities and net assets/fund balances (see instructions) .	266,944	117,533		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	34,498
2 Enter amount from Part I, line 27a	2	400
3 Other increases not included in line 2 (itemize) ▶ _____	3	
4 Add lines 1, 2, and 3	4	34,898
5 Decreases not included in line 2 (itemize) ▶ _____	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	34,898

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-13 regarding controlled entities, distribution to donor advised funds, and public inspection requirements. Row 14 regarding books in care of DAN SEBASTIANI.

Located at 1350 CARLBAC AVENUE STE 350 WALNUT CREEK CA ZIP+4 94596

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. 15

Table with 3 columns: Question, Yes, No. Row 16 regarding interest in or authority over a bank, securities, or other financial account in a foreign country.

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

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

Main table with 3 columns: Question, Yes, No. Rows 1a-1c, 2a-2c, 3a-3b, 4a-4b regarding Form 4720 exceptions and requirements.

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 2018, enter the date of the ruling. ▶

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

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

	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					

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

a "Assets" alternative test—enter

(1) Value of all assets

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

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

c "Support" alternative test—enter

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

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

(3) Largest amount of support from an exempt organization

(4) Gross investment income

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

1 Information Regarding Foundation Managers:

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

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

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

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

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

PATRICK E HANLEY
2929 CLAY STREET
SAN FRANCISCO, CA 94115
(415) 456-4000
PHANLEY@SOCIOUSFOUNDATION.ORG

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

ELECTRONICALLY, CONTACT DIRECTOR

c Any submission deadlines

VARIOUS

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

2500-9999

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total				▶ 3a
b <i>Approved for future payment</i>				
Total				▶ 3b

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

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
PATRICK E HANLEY SR 2929 CLAY ST SAN FRANCISCO, CA 94115	PRESIDENT 000 00	0	0	0
F MICHAEL HEFFERNAN 1350 CARLBACK AVENUE WALNUT CREEK, CA 94596	DIRECTOR 000 00	0	0	0
GREG BUONOCORE 180 HOWARD STREET STE205 SAN FRANCISCO, CA 94105	DIRECTOR 000 00	0	0	0
STEVE DYSON 180 HOWARD STREET STE205 SAN FRANCISCO, CA 94105	DIRECTOR 000 00	0	0	0
SCOTT CULLER 180 HOWARD STREET STE205 SAN FRANCISCO, CA 94105	DIRECTOR 000 00	0	0	0

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
10000 DEGREES 1650 LOS GAMOS DR SUITE SAN RAFAEL, CA 94903	NC	1	2018 GRANT	2,500
ABODE SERVICES40849 FREMONT BLVD FREMONT, CA 94538	NC	1	2018 GRANT	1,000
ACCESED FOUNDATION 2436 SACRAMENTO ST 100 BERKELEY, CA 94702	NC	1	2018 GRANT	1,000
Total ▶ 3a				98,325

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AHEPA SERVICE DOGS FOR WARRIORS IN PO BOX 735 HOLMDEL, NJ 07733	NC	1	2018 GRANT	2,500
ALPHA PREGNANCY CENTER 5070 MISSION STREET SAN FRANCISCO, CA 94112	NC	1	DONATION-CHARLES GARCIA	100
ANGELS AGAINST ABUSE INC 2300 TALL PINES DRIVE SUI LARGO, FL 33771	NC	1	2018 GRANT	2,500
Total ▶ 3a				98,325

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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)				
a <i>Paid during the year</i>				
BE THE MATCH FOUNDATION 500 N 5TH ST MINNEAPOLIS, MN 55401	NC	1	2018 GRANT	1,000
BIG BROTHERS BIG SISTERS OF TAMPA B 4630 WOODLAND CORPORATE B TAMPA, FL 33614	NC	1	2018 GRANT	1,000
BOLTON FOUNDATION 3475 E FOOTHILL BLVD S PASADENA, CA 91107	NC	1	BOARD SPONSORSHIP- BOLTON&CO CORN HOL	1,500
Total ▶ 3a				98,325

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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)				
a <i>Paid during the year</i>				
BOYS AND GIRLS CLUB OF BROWARD 877 NW 61ST STREET FT LAUDERDALE, FL 33309	NC	1	2018 GRANT	1,000
CHILD FAMILY AND COMMUNITY SERVICE 32980 ALVARADO-NILES ROAD UNION CITY, CA 94587	NC	1	2018 GRANT	1,000
CHILDREN'S HOME NETWORK 10909 MEMORIAL HIGHWAY TAMPA, FL 33615	NC	1	2018 GRANT	1,000
Total ▶ 3a				98,325

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Name and address (home or business)				
a <i>Paid during the year</i>				
CHILDREN'S NEUROBLASTOMA CANCER FOU 360 W SCHICK ROAD SUITE BLOOMINGDALE, IL 60108	NC	1	2018 GRANT	1,000
CLOTHES FOR KIDS 1059 N HERCULES AVENUE CLEARWATER, FL 33765	NC	1	2018 GRANT	2,500
COMMUNITY FOOD BANK OF CENTRAL ALAB 107 WALTER DAVIS DRIVE BIRMINGHAM, AL 35209	NC	1	2018 GRANT	2,500
Total ▶ 3a				98,325

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Name and address (home or business)				
a <i>Paid during the year</i>				
CRISIS CENTER OF TAMPA BAY ONE CRISIS CENTER PLAZA TAMPA, FL 33613	NC	1	2018 GRANT	2,500
CYSTIC FIBROSIS FOUNDATION 5100 W KENNEDY BLVD 19 TAMPA, FL 33609	NC	1	EVENT	3,000
CYSTIC FIBROSIS FOUNDATION - FLORID 5100 W KENNEDY BLVD SUI TAMPA, FL 33609	NC	1	2018 GRANT	1,000
Total ▶ 3a				98,325

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Name and address (home or business)				
a <i>Paid during the year</i>				
EVANS SCHOLARS FOUNDATION ONE BRIAR ROAD GOLF, IL 60029	NC	1	DONATION-HANK STICKLEY	250
FAST (FOUNDATION FOR ANGELMAN SYNDR PO BOX 608 DOWNERS GROVE, IL 60515	NC	1	2018 GRANT	1,000
FIRST CHAPTERPO BOX 3952 OAKLAND, CA 94609	NC	1	2018 GRANT	1,000
Total ▶ 3a				98,325

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Name and address (home or business)				
a <i>Paid during the year</i>				
FLORIDA RESURRECTION HOUSE 800 ELEVENTH ST NO ST PETERSBURG, FL 33705	NC	1	2018 GRANT	1,000
GOOD SHEPHERD SHELTER 2561 VENICE BL LOS ANGELES, CA 90019	NC	1	2018 GRANT	2,500
GROWING VETERANSPO BOX 32 COLVILLE, WA 99114	NC	1	2018 GRANT	1,000
Total				98,325

▶ 3a

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Name and address (home or business)				
a <i>Paid during the year</i>				
HARVEST TIME INTERNATIONAL 225 N KENNEL RD SANFORD, FL 32771	NC	1	2018 GRANT	2,500
HEFFERNAN FOUNDATION 1350 CARLBACK AVE SUITE WALNUT CREEK, CA 94596	NC	1	30 YR ANNIVERSARY	5,000
HOMELESS SERVICES CENTER OF SANTA C PO BOX 1319 SANTA CRUZ, CA 95061	NC	1	2018 GRANT	1,000
Total ▶ 3a				98,325

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Name and address (home or business)				
a <i>Paid during the year</i>				
HOSPITALITY HOUSE OF CHARLOTTE 1400 SCOTT AVE CHARLOTTE, NC 28202	NC	1	2018 GRANT	1,000
JAMBOREE HOUSING (SUPPORTIVE HOUSIN 17701 COWAN IRVINE, CA 92614	NC	1	2018 GRANT	1,000
JDRF3411 NW 9TH AVENUE SUITE FT LAUDERDALE, FL 33309	NC	1	2018 GRANT	1,000
Total ▶ 3a				98,325

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Name and address (home or business)				
a <i>Paid during the year</i>				
LINCOLN FAMILIES 1266 14TH STREET OAKLAND, CA 94607	NC	1	2018 GRANT	1,000
MIAMI COUNTRY DAY SCHOOL 601 NE 107TH STREET MIAMI, FL 33161	NC	1	DONATION	3,250
MIAMI COUNTRY DAY SCHOOL 601 NE 107TH STREET MIAMI, FL 33161	NC	1	2018 GRANT	5,000
Total ▶ 3a				98,325

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Name and address (home or business)				
a <i>Paid during the year</i>				
NATIONAL PEDIATRIC CANCER FOUNDATIO 5550 WEST EXECUTIVE DRIVE TAMPA, FL 33609	NC	1	2018 GRANT	1,000
OLD FRIENDS SENIOR DOG SANCTUARY 12110 LEBANNON ROAD MOUNT JULIET, TN 37122	NC	1	DONATION-CYNTHIA ZIMMERMAN	25
PADS LAKE COUNTY 3001 GREEN BAY RD NORTH CHICAGO, IL 60064	NC	1	2018 GRANT	2,500
Total ▶ 3a				98,325

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Name and address (home or business)				
a <i>Paid during the year</i>				
PARCPO BOX 47799 ST PETERSBURG, FL 33743	NC	1	2018 GRANT	2,100
RBC MARIA RELIEF CALLE 9 NUEVA FINAL RINCON, PR 00677	NC	1	2017 PLUS 3 DONATION (NOT REPORTED I	3,000
REACH RESOURCE FOR EDUCATION 9300 SANTA FE SPRINGS RD SANTA FE SPRINGS, CA 90670	NC	1	2018 GRANT	1,000
Total ▶ 3a				98,325

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Name and address (home or business)				
a <i>Paid during the year</i>				
RYAN'S REACH13 AUGUSTA COTO DE CAZA, CA 92679	NC	1	2018 GRANT	1,000
SACRAMENTO CHILDRENS HOME 2750 SUTTERVILLE ROAD SACRAMENTO, CA 95820	NC	1	2018 GRANT	2,500
SOCIETY OF ST VINCENT DE PAUL 384 15TH ST N ST PETERSBURG, FL 33705	NC	1	2018 GRANT	1,000
Total				98,325

▶ **3a**

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Name and address (home or business)				
a <i>Paid during the year</i>				
SPARK101A CLAY ST 188 SAN FRANCISCO, CA 94111	NC	1	2018 GRANT	1,000
ST ANDREW CATHOLIC CHURCH 1571 SOUTHGATE AVENUE DALY CITY, CA 94015	NC	1	MATCHING DONATION - MARIA DE LA CRUZ	250
ST BEDE SCHOOL 26910 PATRICK AVENUE HAYWARD, CA 94544	NC	1	DONATION - CHERYL ELCHICO	200
Total				98,325

▶ **3a**

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Name and address (home or business)				
a <i>Paid during the year</i>				
ST JUDE CHILDREN'S RESEARCH HOSPIT 262 DANNY THOMAS PLACE MEMPHIS, TN 38105	NC	1	2018 GRANT	1,000
STERNE SCHOOL838 KEARNY ST SAN FRANCISCO, CA 94108	NC	1	2018 GRANT	5,000
STRAY CAT ALLIANCEPO BOX 661277 LOS ANGELES, CA 90066	NC	1	DONATION-CHRISTINA BELTRAN	250
Total				98,325

▶ **3a**

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Name and address (home or business)				
a <i>Paid during the year</i>				
TAMPA METROPOLITAN YMCA- CENTRAL CI 110 E OAK AVE TAMPA, FL 33602	NC	1	2018 GRANT	1,000
THE FRIENDS OF ISRAEL GOSPEL MINIST P O BOX 908 BELLMAWR, NJ 080990908	NC	1	DONATION-CHARLES GARCIA	100
THE MARSHALL PROJECT 156 WEST 56TH STREET 701 NEW YORK, NY 10019	NC	1	DONATION - MICHAEL HOY	125
Total ▶ 3a				98,325

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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)				
a <i>Paid during the year</i>				
THE MAVEN PROJECT 3838 CALIFORNIA STREET SU SAN FRANCISCO, CA 94118	NC	1	2018 GRANT	1,000
THE PAYTON WRIGHT FOUNDATION PO BOX 110067 BRADENTON, FL 34211	NC	1	2018 GRANT	2,500
THE RUSSELL HOME FOR ATYPICAL CHILD 510 HOLDEN AVENUE ORLANDO, FL 32839	NC	1	2018 GRANT	2,500
Total ▶ 3a				98,325

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Name and address (home or business)				
a <i>Paid during the year</i>				
THE USOPO BOX 96860 WASHINGTON, DC 20077	NC	1	DONATION-CHARLES GARCIA	50
TOP BUTTONS236 N KENTUCKY AVENUE LAKELAND, FL 33801	NC	1	2018 GRANT	1,000
TRINITY UNIVERSITY ONE TRINITY PLACE SAN ANTONIO, TX 78212	NC	1	2018 GRANT	5,000
Total ▶ 3a				98,325

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Name and address (home or business)				
a <i>Paid during the year</i>				
TRINITY WITHOUT BORDERS INC 5020 ROYAL PALM AVE SARASOTA, FL 34234	NC	1	2018 GRANT	2,500
UCP OF ORANGE COUNTY 980 ROOSEVELT SUITE 100 IRVINE, CA 92620	NC	1	2018 GRANT	1,000
UPLIFT FAMILY SERVICES 251 LIEWELLYN AVE CAMPBELL, CA 95008	NC	1	2018 GRANT	1,000
Total ▶ 3a				98,325

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Name and address (home or business)				
<i>a Paid during the year</i>				
VETERANS COMMUNITY PROJECT 8900 TROOST AVE KANSAS CITY, MO 64131	NC	1	2018 GRANT	2,500
YOUTH CHALLENGE 800 SHARON DRIVE WESTLAKE, OH 44145	NC	1	DONATION - MICHAEL HOY	125
Total ▶ 3a				98,325

TY 2018 Accounting Fees Schedule**Name:** SOCIUS FOUNDATION**EIN:** 46-3951294

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	2,225			

TY 2018 Other Expenses Schedule**Name:** SOCIUS FOUNDATION**EIN:** 46-3951294**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
BANK FEES	1,153			
OTHER TAXES AND FEES	125			

TY 2018 Other Income Schedule**Name:** SOCIUS FOUNDATION**EIN:** 46-3951294**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
FUNDRAISING ACTIVITIES NET	31,807		

**TY 2018 Substantial Contributors
Schedule****Name:** SOCIUS FOUNDATION**EIN:** 46-3951294**Name****Address**

PATRICK HANLEY

2929 CLAY STREET
SAN FRANCISCO, CA 94115

PAUL LEFCOURT

393 HERMOSA COURT
LAFAYETTE, CA 94549

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

Schedule of Contributors
▶ Attach to Form 990, 990-EZ, or 990-PF
▶ Go to www.irs.gov/Form990 for the latest information

OMB No 1545-0047
2018

Name of the organization
SOCIUS FOUNDATION

Employer identification number
46-3951294

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

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

Form 990-PF

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

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

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹ 3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc , purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc , contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution. An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization SOCIUS FOUNDATION	Employer identification number 46-3951294
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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	GREG MILLER 1640 DAYTONA COURT MAIMI BEACH, FL 33141	\$ 5,000	Person <input type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
2	PAUL LEFCOURT 393 HERMOSA COURT LAFAYETTE, CA 94549	\$ 10,000	Person <input type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
3	PATRICK E HANLEY 2929 CLAY STREET SAN FRANCISCO, CA 941151712	\$ 10,100	Person <input type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
4	RSUI INDEMNITY COMPANY 945 E PACES FERRY ROAD STE 1800 ATLANTA, GA 303261160	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
5	TRAVELERS 1 TOWER SQUARE 6PB HARTFORD, CT 061831110	\$ 5,000	Person <input type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
6	QBE HOLDINGS 26 GRISWOLD DRIVE WEST HARTFORD, CT 06119	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization SOCIOUS FOUNDATION	Employer identification number 46-3951294
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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
_____	_____
_____	_____