

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 CLOVERLANE FOUNDATION		A Employer identification number 77-0324667	
Number and street (or P O box number if mail is not delivered to street address) PO BOX 849		Room/suite	
B Telephone number (see instructions) (949) 240-3160		C If exemption application is pending, check here <input type="checkbox"/>	
City or town, state or province, country, and ZIP or foreign postal code SANTA YNEZ, CA 93460		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		E If private foundation status was terminated under section 507(b)(1)(A), 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		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ <u>918,889</u>		J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis)</i>	

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	177,700			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	404	404	404	
	4 Dividends and interest from securities	22,248	22,248	22,248	
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	43,123			
	b Gross sales price for all assets on line 6a <u>448,824</u>				
	7 Capital gain net income (from Part IV, line 2)		43,123		
	8 Net short-term capital gain			13,148	
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	243,475	65,775	35,800		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0	0	0	0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule)	11,630	0	0	11,630
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	2,302	2,302	0	60
	19 Depreciation (attach schedule) and depletion	440	0	655	
	20 Occupancy				
	21 Travel, conferences, and meetings	11,012	0	0	11,012
	22 Printing and publications				
	23 Other expenses (attach schedule)	78,571	710	0	77,839
	24 Total operating and administrative expenses. Add lines 13 through 23	103,955	3,012	655	100,541
	25 Contributions, gifts, grants paid	93,594			93,594
26 Total expenses and disbursements. Add lines 24 and 25	197,549	3,012	655	194,135	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	45,926				
b Net investment income (if negative, enter -0-)		62,763			
c Adjusted net income (if negative, enter -0-)			35,145		

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	27,162	23,968	23,968
	2 Savings and temporary cash investments	27,348	152,005	152,005
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	720,660	648,443	715,381
	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)	18,373	15,493	27,320
	14 Land, buildings, and equipment basis ▶ <u>20,103</u> Less accumulated depreciation (attach schedule) ▶ <u>18,701</u>	1,842	1,402	215
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	795,385	841,311	918,889	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow 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	0	0	
	28 Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
29 Retained earnings, accumulated income, endowment, or other funds	795,385	841,311		
30 Total net assets or fund balances (see instructions)	795,385	841,311		
31 Total liabilities and net assets/fund balances (see instructions) .	795,385	841,311		

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	795,385
2 Enter amount from Part I, line 27a	2	45,926
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3	4	841,311
5 Decreases not included in line 2 (itemize) ▶ _____	5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	841,311

Part VII-A Statements Regarding Activities (continued)

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule See instructions.
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement See instructions
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A
14 The books are in care of ELAINE PRICE CPA Telephone no (949) 240-3160

Located at PO BOX 3930 DANA POINT CA ZIP+4 92629

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

16 At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes", enter the name of the foreign country

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

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

1a During the year did the foundation (either directly or indirectly)
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?
(6) Agree to pay money or property to a government official?
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
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018?
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))
a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018?
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?
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here
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 2018 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?
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?

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. 2017-04-14

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

	Tax year				(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	35,145	25,769	21,162	8,439	90,515
b 85% of line 2a	29,873	21,904	17,988	7,173	76,938
c Qualifying distributions from Part XII, line 4 for each year listed	194,135	141,744	53,851	75,722	465,452
d Amounts included in line 2c not used directly for active conduct of exempt activities	0	7,754	5,451	12,432	25,637
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	194,135	133,990	48,400	63,290	439,815
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					0
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.	32,299	30,883	25,968	5,626	94,776
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)					0
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					0
(3) Largest amount of support from an exempt organization					0
(4) Gross investment income					0

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))
 GERALD CHASE

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

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

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

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

c Any submission deadlines

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

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

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

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e.g., real estate, (a) 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)
1 MANTECH INTL CORP		2017-10-16	2018-07-05
1 DELUXE CORP		2015-01-30	2018-06-25
MICROCHIP TECHNOLOGY		2016-08-15	2018-10-05
VIACOM INC		2016-08-29	2018-07-20
CHUBB LTD		2016-06-06	2018-05-22
WASTE MANAGEMENT		2009-11-23	2018-12-17

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(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)
82,302		69,154	13,148
67,322		64,930	2,392
69,066		61,110	7,956
41,316		62,607	-21,291
134,900		127,660	7,240
53,918		20,240	33,678

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

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	
			13,148
			2,392
			7,956
			-21,291
			7,240
			33,678

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>				
AMERICAN LEGION 124 N RAMONA ST HEMET, CA 92543	NONE	PUBLIC	GENERAL OPERATIONS	1,091
ASPCA 424 E 92ND ST NEW YORK, NY 10128	NONE	PUBLIC	GENREAL OPERATIONS	60
AUDOBON SOCIETY 225 VARICK ST NEW YORK, NY 10014	NONE	PUBLIC	GENERAL OPERATIONS	100
Total ▶ 3a				93,594

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>				
JONATA OAK VALLEY PTSA 301 SECOND STREET BUELLTON, CA 93427	NONE	PUBLIC	GENERAL OPERATIONS	100
NEXT STEP SERVICE DOGS 921 S ANDREASEN DRIVE ESCONDIDO, CA 92029	NONE	PUBLIC	TRAINS DOGS TO ASSIST VETERANS WITH PTSD	40,000
PLANNED PARENTHOOD 123 WILLIAM STREET 10TH FLOOR NEW YORK, NY 10038	NONE	PUBLIC	GENERAL OPERATIONS	50
Total ▶ 3a				93,594

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>				
MSJC FOUNDATION 1499 N STATE ST SAN JACINTO, CA 925832399	NONE	PUBLIC	FUNDRAISER FOR VETERANS & VETERAN RESOURCE CENTER AT MT SAN JACINTO COLLEGE	250
SANTA BARBARA RESCUE MISSION 535 E YANONALI ST SANTA BARBARA, CA 93103	NONE	PUBLIC	GENERAL OPERATIONS	100
SANTA YNEZ HUMANE SOCIETY 111 COMMERCE DRIVE BUELLTON, CA 93427	NONE	PUBLIC	GENERAL OPERATIONS	100
Total ▶ 3a				93,594

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
a <i>Paid during the year</i>				
SO POVERTY LAW CENTER 400 WASHINGTON AVE MONTGOMERY, AL 36104	NONE	PUBLIC	GENERAL OPERATIONS	200
VETERANS PAYING IT FORWARD 34031 MORRIS RANCH ROAD MOUNTAIN CENTER, CA 92561	NONE	PUBLIC	PROVIDE SERVICES FOR VETERANS SEEKING ASSISTANCE WITH THEIR VA CLAIMS	36,500
VIVAPO BOX 896 LOMPOC, CA 93438	NONE	PUBLIC	GENERAL OPERATIONS	850
Total				93,594



3a

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
YMCA36 HITCHCOCK WAY SANTA BARBARA, CA 93105		PUBLIC	GENERAL OPERATIONS	768
DISABLED VETERANS 3725 ALEXANDRIA PIKE COLD SPRING, CO 41076		PUBLIC	GENERAL OPERATIONS	100
DOBERMAN RESCUE2946 YOUNG ROAD FILLMORE, CA 93015		PUBLIC	GENERAL OPERATIONS	300
Total ▶ 3a				93,594

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>				
HEMET YOUTH BASEBALL 3707 MUSTANG WAY HEMET, CA 92545		PUBLIC	SPONSORSHIP FOR UNDERPRIVILGED	350
NATIONAL WILDLIFE 11100 WILDFILE CENTER DR RESTON, VA 20190		PUBLIC	GENERAL OPERATION	10
OJAI RAPTOR CENTER 370 BALWIN RD OJAI, CA 93023		PUBLIC	GENERAL OPERATIONS	200
Total				93,594

▶ **3a**

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
VETERANS MOBILITY PROJECT PO BOX 3930 DANA POINT, CA 92629		PUBLIC	GENERAL OPERATIONS AND WHEELCHAIRS	11,254
412 CHURCH1450 W 7TH ST HEMET, CA 92582	NONE	PUBLIC	PURCHASE OF FOOD AND GIFTS FOR UNDERPRIVILEGED CHILDREN FOR HOLIDAY	661
AMERICAN HEART ASSN 7272 GREENVILLE AVE DALLAS, TX 75231	NONE	PUBLIC	GENERAL OPERATIONS	100
Total ▶ 3a				93,594

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>				
SO CA ABYSSINIAN RESCUEPO BOX 57 WHITTIER, CA 90608		PUBLIC	GENERAL OPERATIONS	100
SANTA BARBARA WILDLIFE CARE 1406 N FAIRVIEW AVE GOLETA, CA 93117			GENERAL OPERATIONS	200
SYV BOTANICAL GARDEN 151 SYCAMORE DR BUELLTON, CA 93427			GENERAL OPERATIONS	50
Total ▶ 3a				93,594

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>				
VEGGIE RESCUE3630 SAGUNTO ST SANTA YNEZ, CA 93460			GENERAL OPERATIONS	100
Total			▶ 3a	93,594

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

TY 2018 Depreciation Schedule

Name: CLOVERLANE FOUNDATION

EIN: 77-0324667

Depreciation Schedule

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
OFFICE FURNITURE & EQUIPMENT	2012-08-24	4,822	4,176	200DB	7 000000000000	431	0	646	
STOCK TRAILER	1998-11-13	4,600	4,600	200DB	5 000000000000	0	0	0	
EQUIPMENT	2001-08-23	7,303	7,303	200DB	5 000000000000	0	0	0	
2800PSI WITH CAT PUMP	2004-06-05	846	846	200DB	5 000000000000	0	0	0	
EQUIPMENT	2005-05-05	990	990	200DB	7 000000000000	0	0	0	
EQUIPMENT	2010-06-14	163	163	200DB	7 000000000000	0	0	0	
EQUIPMENT	2011-09-16	192	183	200DB	7 000000000000	9	0	9	

TY 2018 Investments Corporate Stock Schedule**Name:** CLOVERLANE FOUNDATION**EIN:** 77-0324667**Investments Corporation Stock Schedule**

Name of Stock	End of Year Book Value	End of Year Fair Market Value
AT&T CORP	66,943	57,080
WASTE MANAGEMENT INC	95,379	169,081
ARTHUR GALLAGHER & CO	51,016	73,700
WALMART STORES INC	34,373	46,575
CISCO SYSTEMS INC	31,415	43,330
LOWES COMPANIES	79,731	92,360
FORD MOTOR COMPANY	60,613	38,250
CHEVRON	59,698	54,395
GENERAL MOTORS	66,429	50,175
MORGAN STANLEY	50,436	39,650
MICROSOFT	52,410	50,785

TY 2018 Investments - Other Schedule**Name:** CLOVERLANE FOUNDATION**EIN:** 77-0324667**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
ALLIANCE BERNSTEIN HLDG LP	FMV	15,493	27,320

**TY 2018 Land, Etc.
Schedule****Name:** CLOVERLANE FOUNDATION**EIN:** 77-0324667

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
OFFICE FURNITURE & EQUIPMENT	4,822	4,607	215	215
STOCK TRAILER	4,600	4,600	0	0
EQUIPMENT	7,303	7,303	0	0
2800PSI WITH CAT PUMP	846	846	0	0
EQUIPMENT	990	990	0	0
EQUIPMENT	163	163	0	0
EQUIPMENT	192	192	0	0

TY 2018 Other Expenses Schedule**Name:** CLOVERLANE FOUNDATION**EIN:** 77-0324667**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ANIMAL CARE PROGRAM	48,104	0	0	48,104
INSURANCE	1,697	0	0	1,697
OFFICE EXPENSES	3,929	0	0	3,907
ADVERTISING	918	0	0	918
MEALS	793	0	0	793
VETERANS CARE	10,924	0	0	10,924
COMPUTER & INTERNET	1,210	710	0	500
SCHOLARSHIP AWARDS	7,500	0	0	7,500
AUTO	563	0	0	563
BANK CHARGES	30	0	0	30

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
DUES AND SUBSCRIPTIONS	420	0	0	420
TUTORING	2,405	0	0	2,405
POSTAGE	78	0	0	78

TY 2018 Other Professional Fees Schedule**Name:** CLOVERLANE FOUNDATION**EIN:** 77-0324667

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CONSULTING SERVICES	11,630	0	0	11,630

TY 2018 Taxes Schedule**Name:** CLOVERLANE FOUNDATION**EIN:** 77-0324667

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FRANCHISE TAX BOARD	10	10	0	10
FILING FEES	50	50	0	50
FEDERAL TAXES	2,242	2,242	0	0

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
CLOVERLANE FOUNDATION

Employer identification number
77-0324667

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 CLOVERLANE FOUNDATION	Employer identification number 77-0324667
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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	GERALD CHASE PO BOX 849 SANTA YNEZ, CA 93460	\$ 162,410	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
2	CLOVERLANE ASSOCIATES INC PO BOX 849 SANTA YNEZ, CA 93460	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
3	WHITEHALL ASSOCIATES GROUP 75 FORT STREET GEORGETOWN, GRAND CAYMAN CJ	\$ 10,000	Person <input checked="" 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)

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Part II Noncash Property

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	500 SHARES OF COMMON STOCK OF MICROSOFT CORP	\$ 52,410	2018-12-07
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization CLOVERLANE FOUNDATION	Employer identification number 77-0324667
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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

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