FOR PUBLIC DISCLOSURE EXTENDED TO NOVEMBER 15, 2019

Form	990-T	E	Exempt Organization Bus and proxy tax unde		OMB No. 1545-0687			
				0040				
		For ca	lendar year 2018 or other tax year beginning		, and ending		_ ·	Ζυ Ιδ
	tment of the Treasury al Revenue Service	>	► Go to www.irs.gov/Form990T for ins Do not enter SSN numbers on this form as it may					Open to Public Inspection for 501(c)(3) Organizations Only
A	Check box if address changed		Name of organization (Check box if name ch	(Emp	loyer identification number loyees' trust, see uctions.)			
B E	xempt under section	Print	THE DAVID AND LUCILE PA	ACK <i>I</i>	ARD FOUNDATI	ON	9	4-2278431
X] 501(c)(3)	or	Number, street, and room or suite no. If a P.O. box		lated business activity code instructions.)			
	408(e) 220(e)	Туре	343 SECOND STREET		,			
	408A 530(a)		City or town, state or province, country, and ZIP or		n postal code			
	529(a) ok value of all assets		LOS ALTOS, CA 94022-36	22			523	000
Cat	end of year	01	F Group exemption number (See instructions.) G Check organization type ► X 501(c) corp	• • • • • • • • • • • • • • • • • • •	F04(a) tourst	404(-)	44	Oth or torret
				oration 1		401(a)		Other trust
		-	INDIS UNFERRED TRACES OF DUSINESSES. VESTMENTS IN PARTNERSHIE			he only (or first) un complete Parts I-V.		
			ice at the end of the previous sentence, complete Pai					
	siness, then complete			is i aii	u II, complete a Schedule	IVI TOT GACTI AUUTTOTI	ai iiaut	5 01
			-v. poration a subsidiary in an affiliated group or a paren	t-suhsi	diary controlled group?		Yı	es X No
			tifying number of the parent corporation.	t ouboi	alary controlled group.			00 [==] 140
			CRAIG NEYMAN, CFO		Telepho	ne number 🕨 6	50-	948-7658
Pa	rt I Unrelated	d Trac	de or Business Income		(A) Income	(B) Expenses		(C) Net
1 a	Gross receipts or sale	es						
b	Less returns and allow	vances	c Balance ▶	1c				
2	Cost of goods sold (S	Schedule	A, line 7)	2				
3	Gross profit. Subtract			3				
4 a			h Schedule D)	4a	6,288,168.			6,288,168.
b			art II, line 17) (attach Form 4797)	4b				
C			sts	4c	0050001	~ ~ ·		0050001
5			ship or an S corporation (attach statement)	5	-22502291.	STMT 2	<u> </u>	-22502291.
6	Rent income (Schedu	, ,	(0.1, 1.1, 5)	6				
7			me (Schedule E)	7				
8	· · · · · · · · · · · · · · · · · · ·		nd rents from a controlled organization (Schedule F)	<u>8</u> 9				
9 10			on 501(c)(7), (9), or (17) organization (Schedule G) me (Schedule I)	10				
11			e J)	11				
12			ns; attach schedule)	12				
13	Total. Combine lines	3 throu	gh 12		-16214123.			-16214123.
	rt II Deductio	ns No	ot Taken Elsewhere (See instructions fo	r limita	ations on deductions.)			
			utions, deductions must be directly connected			ncome.)		
14	Compensation of off	icers, di	rectors, and trustees (Schedule K)				14	
15							15	
16							16	
17	Bad debts						17	
18			ee instructions)				18	F10 7F0
19	Taxes and licenses						19	519,752.
20			e instructions for limitation rules)				20	
21 22			562) n Schedule A and elsewhere on return				22b	
23							23	
23 24	Depletion Contributions to defe	erred co	mpensation plans				24	
25			IIIperisation piaris				25	
26			chedule I)				26	
27			hedule J)				27	
28			nedule)				28	
29			14 through 28				29	519,752.
30			ncome before net operating loss deduction. Subtract				30	-16733875.
31	Deduction for net op	erating	loss arising in tax years beginning on or after Januar	y 1, 20	18 (see instructions)		31	
32	Unrelated business t	axable i	ncome. Subtract line 31 from line 30				32	-16733875.



Department of the Treasury Internal Revenue Service Ogden, UT 84201

Notice	CP211A
Tax period	December 31, 2018
Notice date	July 29, 2019
Employer ID number	94-2278431
To contact us	Phone 877-829-5500
	FAX 877-792-2864
D 4 . C 4	

Page 1 of 1



297822

Important information about your December 31, 2018 Form 990T

We approved your Form 8868, Application for Extension of Time To File an Exempt Organization Return

We approved the Form 8868 for your December 31, 2018 Form 990T.

Your new due date is November 15, 2019.

What you need to do

File your December 31, 2018 Form 990T by November 15, 2019.

Visit www.irs.gov/charities to learn about approved e-File providers, what types of returns can be filed electronically, and whether you are required to file electronically.

Additional information

- Visit www.irs.gov/cp211a
- For tax forms, instructions, and publications, visit www.irs.gov/forms-pubs or call 800-TAX-FORM (800-829-3676).
- Keep this notice for your records.

If you need assistance, please don't hesitate to contact us.

THE DAVID AND LUCILE PACKARD FOUNDATION 94-2278431 Part III **Total Unrelated Business Taxable Income** -16733875. Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) 33 Amounts paid for disallowed fringes 37,430. 34 34 35 Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions) 35 36 Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of -16696445. Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions) 1,000. 37 Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36, -16696445. enter the smaller of zero or line 36 Part IV Tax Computation Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21) 39 39 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from: Tax rate schedule or Schedule D (Form 1041) 40 Proxy tax. See instructions 41 41 42 Alternative minimum tax (trusts only) 42 Tax on Noncompliant Facility Income. See instructions 43 43 0 **Total.** Add lines 41, 42, and 43 to line 39 or 40, whichever applies 44 44 Part V Tax and Payments 45a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) **b** Other credits (see instructions) 45b General business credit. Attach Form 3800 45c d Credit for prior year minimum tax (attach Form 8801 or 8827) e Total credits. Add lines 45a through 45d 0. Subtract line 45e from line 44 Subtract line 45e from line 44

Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 46 47 47 0. 48 Total tax. Add lines 46 and 47 (see instructions) 48 2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2 0. 49 753,965 50 a Payments: A 2017 overpayment credited to 2018 50a 1,850,000. **b** 2018 estimated tax payments 50b c Tax deposited with Form 8868 **d** Foreign organizations: Tax paid or withheld at source (see instructions) 50d e Backup withholding (see instructions) f Credit for small employer health insurance premiums (attach Form 8941) 50f g Other credits, adjustments, and payments: Form 2439 X Other 2, $\overline{169,837}$. 2,169,837. Total > Form 4136 4,773,802. SEE STATEMENT 4 51 **Total payments.** Add lines 50a through 50g Estimated tax penalty (see instructions). Check if Form 2220 is attached 52 Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed 53 53 Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid 54 Enter the amount of line 54 you want: Credited to 2019 estimated tax \blacktriangleright 4,773,802. 55 0. Part VI Statements Regarding Certain Activities and Other Information (see instructions) At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority No Yes over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country SEE STATEMENT 3 Х Х 57 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes." see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year \>\$ 58 Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Sign May the IRS discuss this return with Here CFO the preparer shown below (see Signature of officer instructions)? X Yes Date Date PTIN Preparer's signature if Print/Type preparer's name Check self- employed Paid oan McMahon 11/7/19 JOAN S. MCMAHON P00966494 **Preparer** Firm's name ► DELOITTE TAX 86-1065772 Firm's EIN ► **Use Only** 555 MISSION ST Firm's address ► SAN FRANCISCO, CA 94105 Phone no. 415-738-4000

Form 990-T (2018)

Form 990-T (2018) THE DAVID AND LUCILE PACKARD FOUNDATION

94-2278431

Page 3

Schedule A - Cost of Goods Sold. Ent	er method of inve	ntory v	aluation ► N/A					
1 Inventory at beginning of year 1		6	Inventory at end of yea	r		6		
2 Purchases 2			Cost of goods sold. Su					
3 Cost of labor 3			from line 5. Enter here					
4a Additional section 263A costs			line 2			7		
(attach schedule) 4a		8	Do the rules of section		Yes	No		
b Other costs (attach schedule) 4b			property produced or a	cquired	l for resale) apply to			
E Tatal Add Cons. Address of the			the organization?					
Schedule C - Rent Income (From Rea (see instructions)	l Property and	d Per	sonal Property L	ease	d With Real Prop	erty)	
1. Description of property								
(2)								
(3)								
(4)								
·	eived or accrued							
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	of rent for	personal	onal property (if the percentage property exceeds 50% or if ed on profit or income)	ge	3(a) Deductions directly columns 2(a) a	/ conne nd 2(b)	cted with the income in (attach schedule)	ı
(1)								
(2)								
(3)								
(4)								
Total 0	Total			0.				
(c) Total income. Add totals of columns 2(a) and 2(b). here and on page 1, Part I, line 6, column (A)				0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	. ▶		0.
Schedule E - Unrelated Debt-Finance	d Income (see	e instru	ctions)					
		,	0		Deductions directly cor to debt-finan-			
Description of debt-financed property			. Gross income from or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	DCG Pro	(b) Other deduction (attach schedule)	s
(1)						+		
(2)								
(3)						+		
(4)								
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 5. Avera debt-f	age adjusted basis or allocable to inanced property ach schedule)	6	Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)		8. Allocable deducti (column 6 x total of col 3(a) and 3(b))	
(1)			%					
(2)			%					
(3)			%					
(4)			%					
					inter here and on page 1, Part I, line 7, column (A).		Enter here and on page Part I, line 7, column (
Totals					0			0.
Total dividends-received deductions included in colu	0					<u> </u>		0.

Form **990-T** (2018)

Form 990-T (2018) THE DAY	VID AI	ND LUC	CILE I	PACKA	RD FOUL	IDATI	ON	4:	94-22	78431	. Page 4
Schedule F - Interest, A	nnuities	s, Royan	ties, and		Controlled O			itions	see ins	structions	5)
1. Name of controlled organization	on	2. Em identifi num	cation				al of specified 5. Part of column 4 that is			6. Deductions directly connected with income in column 5	
(1)											
(2)											
(3)											
(4)	otiono					l		l			
Nonexempt Controlled Organiz						I				l	
7. Taxable Income		nrelated incom ee instructions		9. Total	of specified payr made	nents	10. Part of colu in the controlli gross		nization's		uctions directly connected income in column 10
(1)											
(2)											
(3)											
(4)											
							Add colur Enter here and line 8, 0		e 1, Part I, A).	Enter he	d columns 6 and 11. re and on page 1, Part I, ine 8, column (B).
Totals Colored Totals			······································	E04/a\/	7) (0) 0 (>			0.		0.
Schedule G - Investmer		ne or a s	ection	501(C)(<i>I</i>	7), (9), or (17) Org	janization				
	iption of incor	ne			2. Amount of	income	3. Deduction directly connection (attach scheduler)	ected	4. Set-	asides schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)							(attaon conce	auto)			(GOI. O PIGO COI. 4)
(2)											
(3)											
(4)											
(4)					Enter here and Part I, line 9, co						Enter here and on page 1, Part I, line 9, column (B).
Totals				•		0.					0.
Schedule I - Exploited E	•	Activity	Income	, Other	Than Adv		g Income				
			2		4. Net incon	ne (loss)					7 5
1. Description of exploited activity	2. G unrelated income trade or b	business e from	3. Exp directly control with pro- of unro- business	onnected duction elated	from unrelated business (co minus colum gain, comput through	trade or olumn 2 n 3). If a e cols. 5	5. Gross incompromativity is not unrelated business incompromatical forms of the second sec	that ted	6. Exp attribut colu		7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)											
(2)											
(3)											
(4)											
	Enter here page 1, line 10,	Part I,	Enter her page 1, line 10,	, Part I,							Enter here and on page 1, Part II, line 26.
Totals		0.		0.							0.
Schedule J - Advertisin											
Part I Income From F	Periodic	als Repo	orted or	n a Con	solidated	Basis					
1. Name of periodical		2. Gross advertising income		3. Direct ertising costs	or (loss) (c col. 3). If a g	tising gain ol. 2 minus ain, comput nrough 7.	5. Circula income		6. Read		7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)											
(2)											
(3)											
(4)											
Totals (carry to Part II, line (5))	•	(o.	0							0.
- () : (0))			1						·	<u> </u>	Farm 990-T (2018)

Form 990-T (2018) THE DAVID AND LUCILE PACKARD FOUNDATION 94-22784

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in 94-2278431 Page 5 columns 2 through 7 on a line-by-line basis.) 4. Advertising gain or (loss) (col. 2 minus 7. Excess readership costs (column 6 minus 2. Gross advertising 3. Direct 5. Circulation 6. Readership 1. Name of periodical col. 3). If a gain, compute cols. 5 through 7. advertising costs income costs column 5, but not more income than column 4). (1) (2) (3) (4)0 0. 0. Totals from Part I Enter here and on page 1, Part II, line 27. Enter here and on page 1, Part I, line 11, col. (A). Enter here and on page 1, Part I, line 11, col. (B). Totals, Part II (lines 1-5) 0 0 0. Schedule K - Compensation of Officers, Directors, and Trustees (see instructions) 3. Percent of time devoted to

1. Name

2. Title

3. Percent of time devoted to business

4. Compensation attributable to unrelated business

(1)
(2)
(3)
(4)

Total. Enter here and on page 1, Part II, line 14

4. Compensation attributable to unrelated business

%

4. Compensation attributable to unrelated business

%

4. Compensation attributable to unrelated business

%

7. Title

7. Title

7. Title

7. Total Enter here and on page 1, Part II, line 14

Form **990-T** (2018)

823732 01-09-19

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TIIL	$D \times V \times D$	TIND	постпв	LUCIUMD	LOONDALLON

94-2278431

STATEMENT 3

DESCRIPTION	NET INCOME OR (LOSS)
FROM PARTNERSHIP - ORDINARY BUSINESS INCOME (LOSS)	-22,502,291.
TOTAL INCLUDED ON FORM 990-T, PAGE 1, LINE 5	-22,502,291.

NAME OF FOREIGN COUNTRY IN WHICH

ORGANIZATION HAS FINANCIAL INTEREST

NAME OF COUNTRY

FORM 990-T

UNITED KINGDOM IRELAND NETHERLANDS JERSEY

FORM 990-T	OTHER CREDITS AND PAYMENTS	STATEMENT 4
DESCRIPTION FORM 8827, LINE 8C		AMOUNT 2,169,837.
TOTAL INCLUDED ON FORM	990-T, PAGE 2, PART V, LINE 50G	2,169,837.

SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service **Capital Gains and Losses**

OMB No. 1545-0123

Name

Employer identification number

THE DAVID AND LUCILE PACKARD FOUNDATION 94-2278431 Short-Term Capital Gains and Losses (See instructions.) See instructions for how to figure the amounts to enter on the lines below. (d) Proceeds (sales price) (**g**) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g) (e) (h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g) This form may be easier to complete if you round off cents to whole dollars. (or other basis) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b 1b Totals for all transactions reported on Form(s) 8949 with Box A checked Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on -38,874. Form(s) 8949 with Box C checked Short-term capital gain from installment sales from Form 6252, line 26 or 37 4 5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824 5 6 Unused capital loss carryover (attach computation) 6 -38,874Net short-term capital gain or (loss). Combine lines 1a through 6 in column h 7 Long-Term Capital Gains and Losses (See instructions.) See instructions for how to figure the amounts (h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g) (d) Proceeds (e) Cost (or other basis) (g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g) to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars. (sales price) $\textbf{8a} \ \ \text{Totals for all long-term transactions reported}$ on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to Totals for all transactions reported on Form(s) 8949 with Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on 399,088. Form(s) 8949 with Box F checked 5,927,954. 11 11 Enter gain from Form 4797, line 7 or 9 12 Long-term capital gain from installment sales from Form 6252, line 26 or 37 12 13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824 13 14 Capital gain distributions 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h 6,327,042. 15 Part III Summary of Parts I and II 16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) 16 6,288,168. 17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7) 17 6,288,168. 18 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the proper line on other returns. 18

For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Note: If losses exceed gains, see Capital losses in the instructions.

Schedule D (Form 1120) 2018

JWA

Sales and Other Dispositions of Capital Assets

Department of the Treasury

Internal Revenue Service

THE DAVID AND LUCILE PACKARD FOUNDATION

OMB No. 1545-0074

▶ Go to www.irs.gov/Form8949 for instructions and the latest information. File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Name(s) shown on return

Social security number or taxpayer identification no.

94-2278431

fore you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your	broker. A substitute

Be form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check. Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2. Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS X (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or 1 (a) (c) (d) (h) (e) loss. If you enter an amount Proceeds Description of property Date acquired Date sold or Cost or other Gain or (loss). in column (g), enter a code in (sales price) Subtract column (e) basis. See the (Example: 100 sh. XYZ Co.) (Mo., day, yr.) disposed of column (f). See instructions. Note below and from column (d) & (Mo., day, yr.) (g) Amount of adjustment combine the result see *Column (e*) ir Code(s) with column (g) the instructions FROM PARTNERSHIP <38,874.>

above is checked), or line 3 (if Box C above is checked) Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

<38,874.>

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B

Form 8949 (2018) Attachment Sequence No. 12A Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on page 1 Social security number or taxpaver identification no. THE DAVID AND LUCILE PACKARD FOUNDATION 94-2278431 Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check. Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or Cabadala D. line Service aren't required to report these transactions on Form 8949 (see instructions). codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (F) Long-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or 1 (a) (b) (c) (d) (e) (h) loss. If you enter an amount Proceeds Cost or other Gain or (loss). Description of property Date acquired Date sold or in column (g), enter a code in (sales price) basis. See the Subtract column (e) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) disposed of column (f). See instructions. from column (d) & Note below and (Mo., day, yr.) see *Column (*e) ir combine the result Amount of Code(s) with column (g) the instructions adjustment FROM PARTNERSHIP 399,088.

negative amounts). Enter each total here and include on your
Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked)

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract

adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

823012 11-28-18

Form 8949 (2018)

Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2)) Attach to your tax return.

► Go to www.irs.gov/Form4797 for instructions and the latest information.

OMB No. 1545-0184

Department of the Treasury Internal Revenue Service Name(s) shown on return

TH:	E DAVID AND LUCILE :	PACKARD I	OUNDATIO	ON				94-2278431
1 E	nter the gross proceeds from sales or							
(c	or substitute statement) that you are in		1					
Pa	rt I Sales or Exchanges						rsic	ons From
	Other Than Casualty	or Theft-Mo	st Property	Held More Tha	an 1 Year (see	instructions)		
2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(C) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since	(f) Cost or other basis, plus improvements and approvements and approvements and approvements and approvements are approved to the proveness of the proveness o	and	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
					acquisition	expense of sa	ie	F 00F 0F4
FR	OM PARTNERSHIP							5,927,954.
						<u> </u>		
3	Gain, if any, from Form 4684, line 39)					3	
4	Section 1231 gain from installment s						4	
5	Section 1231 gain or (loss) from like-	kind exchanges	from Form 8824				5	
6	Gain, if any, from line 32, from other	than casualty or	theft				6	
7	Combine lines 2 through 6. Enter the	e gain or (loss) he	ere and on the ap	opropriate line as f	ollows	L	7	5,927,954.
	Partnerships and S corporations. line 10, or Form 1120S, Schedule K,				or Form 1065, Sch	edule K,		
	Individuals, partners, S corporatio	n shareholders.	and all others.	If line 7 is zero or	a loss, enter the ar	mount		
	from line 7 on line 11 below and skip	•			,			
	1231 losses, or they were recaptured	•			ong-term capital ga	in on		
	the Schedule D filed with your return	n and skip lines 8	, 9, 11, and 12 b	elow.				
8	Nonrecaptured net section 1231 los	ses from prior ve	ars. See instruct	ions		Γ	8	
9	Subtract line 8 from line 7. If zero or	. ,						
	line 9 is more than zero, enter the ar			~				
	capital gain on the Schedule D filed			•			9	5,927,954.
Da								
Pa	rt II Ordinary Gains and I	Losses (see in	structions)					
10	Ordinary gains and losses not include	led on lines 11 th	rough 16 (includ	le property held 1	year or less):			
11	Loss, if any, from line 7	•		•	•		11	()
12	Gain, if any, from line 7 or amount from	om line 8. if appl	icable			····	12	,
13	Gain, if any, from line 31						13	
14	Net gain or (loss) from Form 4684, lin	nes 31 and 38a				·····	14	
15	Ordinary gain from installment sales						15	
16	Ordinary gain or (loss) from like-kind						16	
17							17	
18	For all except individual returns, enter							
	a and b below. For individual returns			11121 - 121 / 2013 111 / 0	,			
а	If the loss on line 11 includes a loss	•		(b)(ii), enter that no	art of the loss here	. Enter		
_	the loss from income-producing prop							
	used as an employee.) Identify as fro				lolade arly loos on	. Г	18a	
b						·····		
-	Schedule 1 (Form 1040), line 14	•					18b	

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 4797 (2018) THE DAVID AND LUCILE PACKARD FOUNDATION

94-2278431

Page 2

Part III Gain Fro	m Disposition of Propert	y Und	ler Sections 1245	, 1250, 1252	, 125	54, and 1255	(see	instructions)
19 (a) Description of se	ection 1245, 1250, 1252, 1254, c	or 1255	property:			(b) Date acquir (mo., day, yr.)		(c) Date sold (mo., day, yr.)
Α								
В								
С								
D			T					
	ate to the properties on		_	_	_	_		
lines 19A through		▶	Property A	Property	В	Property ()	Property D
. ,	te: See line 1 before completing.)	20						
	plus expense of sale	21						
	oletion) allowed or allowable	22						
	otract line 22 from line 21	23						
	l line 23 from line 20	24						
25 If section 1245 pro	• •							
	ed or allowable from line 22	25a						
	f line 24 or 25a	25b						
	perty: If straight line depreciation line 26g, except for a corporation							
•	n after 1975. See instructions	26a						
b Applicable percenta of line 24 or line 26	age multiplied by the smaller a. See instructions	26b						
property or line 24	om line 24. If residential rental isn't more than line 26a, skip	26c						
d Additional depreciatio	n after 1969 and before 1976	26d						
e Enter the smaller of	of line 26c or 26d	26e						
	t (corporations only)	26f						
g Add lines 26b, 26e,	and 26f	26g						
dispose of farmland o a partnership.	rty: Skip this section if you didn't r if this form is being completed for							
	d clearing expenses	27a						
	applicable percentage	27b						
	of line 24 or 27b	27c						
for development of m	development costs, expenditures nes and other natural deposits, sts, and depletion. See instructions	28a						
b Enter the smaller of	f line 24 or 28a	28b						
	perty: age of payments excluded section 126. See instructions	29a						
	f line 24 or 29a. See instructions	29b						
Summary of Part II	I Gains. Complete property of	olumno	A through D through	line 20h hefere	aoina	to line 20		
	Complete property of	olullilis	A through D through	iiile 29b belore (going	to line 30.		
30 Total gains for all p	roperties. Add property columns	A throu	ugh D, line 24				30	
31 Add property colun	nns A through D, lines 25b, 26g,	27c, 28	Bb, and 29b. Enter here	e and on line 13			31	
	m line 30. Enter the portion from sualty or theft on Form 4797, line		ty or theft on Form 468	34, line 33. Ente	r the p	oortion	32	
Part IV Recaptur	e Amounts Under Sectio	ns 17	9 and 280F(b)(2) \	When Busine	ess l	Jse Drops to	50%	or Less
(see instruct	ions)							
						(a) Section 179		(b) Section 280F(b)(2)
33 Section 179 expens	se deduction or depreciation allo	wable i	n prior years	[33			
•					34			
35 Recapture amount.	Subtract line 34 from line 33. Se				35			

Form **8827**

Credit for Prior Year Minimum Tax - Corporations

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

Attach to the corporation's tax return.

► Go to www.irs.gov/Form8827 for the latest information.

2018

do to www.mo.gov/1 of the factor information.					
Name	Employer identification number				
THE DAVID AND LUCILE PACKARD FOUNDATION	94-2278431				
1 Alternative minimum tax (AMT) for 2017. Enter the amount from line 14 of the 2017 Form 4626	1				
2 Minimum tax credit carryforward from 2017. Enter the amount from line 9 of the 2017 Form 8827	2	4,339,673.			
3 Enter any 2017 unallowed qualified electric vehicle credit (see instructions)	3	_			
4 Add lines 1, 2, and 3	4	4,339,673.			
5 Enter the corporation's 2018 regular income tax liability minus allowable tax credits (see instructions)	5	0.			
6 Enter the refundable minimum tax credit (see instructions)	6	2,169,837.			
7 Add lines 5 and 6	7	2,169,837.			
8a Enter the smaller of line 4 or line 7. If the corporation had a post-1986 ownership change or has pre-acquisition excess credits, see instructions	8a	2,169,837.			
b Current year minimum tax credit. Enter the smaller of line 4 or line 5 here and on Form 1120, Schedule J, Part I, line 5d (or the applicable line of your return). If the corporation had a post-1986 ownership change or has pre-acquisition					
excess credits, see instructions. If you made an entry on line 6, go to line 8c. Otherwise, skip line 8c	8b	0.			
c Subtract line 8b from line 8a. This is the current year refundable minimum tax credit. Include this amount on Form 1120, Schedule J, Part II, line 20c (or the applicable line of your return)	8c	2,169,837.			
Minimum tax credit carryforward to 2019. Subtract line 8a from line 4. Keep a record of this amount to carry forward and use in future years	9	2,169,836.			

Form **8990**(December 2018)
Department of the Treasury

Limitation on Business Interest Expense Under Section 163(j)

► Attach to your tax return.

► Go to www.irs.gov/Form8990 for instructions and the latest information.

OMB No. 1545-0123

Taxpayer name(s) shown on tax return Identification number THE DAVID AND LUCILE PACKARD FOUNDATION 94-2278431 Computation of Allowable Business Interest Expense Part I is completed by all taxpayers subject to section 163(j). Schedule A and Schedule B need to be completed before Part I when the taxpaver is a partner or shareholder of a pass-through entity subject to 163(i). Section I - Business Interest Expense Current year business interest expense (not including floor plan financing interest expense), before the section 163(j) limitation 1 2 Disallowed business interest expense carryforwards from prior years. (Does not apply to a partnership) 2 Partner's excess business interest expense treated as paid or accrued in current year (Schedule A, line 44, column (h)) 3 Floor plan financing interest expense. See instructions Total business interest expense. Add lines 1 through 4 Section II - Adjusted Taxable Income **Taxable Income** -16,214,123. 6 Taxable income. See instructions Additions (adjustments to be made if amounts are taken into account on line 6) Any item of loss or deduction which is not properly allocable to a trade or business of the taxpayer. See instructions 7 8 Any business interest expense not from a pass-through entity. See 8 9 Amount of any net operating loss deduction under section 172 9 Amount of any qualified business income deduction allowed under 10 Deduction allowable for depreciation, amortization, or depletion 11 attributable to a trade or business 11 12 Amount of any loss or deduction items from a pass-through entity. 12 Other additions. See instructions 13 13 Total current year partner's excess taxable income (Schedule A, line 14 44, column (f)) 15 Total current year S corporation shareholder's excess taxable income (Schedule B, line 46, column (c)) Total. Add lines 7 through 15 16 Reductions (adjustments to be made if amounts are taken into account on line 6) 17 Any item of income or gain which is not properly allocable to a trade 17 or business of the taxpayer. See instructions 18 18 Any business interest income not from a pass-through entity. See instructions 19 Amount of any income or gain items from a pass-through entity. 19 See instructions 20 Other reductions. See instructions Total. Combine lines 17 through 20 21 21 Adjusted taxable income. Combine lines 6, 16, and 21. (If zero or less, enter -0-.) 22 Section III - Business Interest Income 23 23 Current year business interest income. See instructions 24 Excess business interest income from pass-through entities (total of 24 Schedule A, line 44, column (g), and Schedule B, line 46, column (d)) Total. Add lines 23 and 24 25

Page 2 Form 8990 (12-2018) Section IV - 163(j) Limitation Calculations **Limitation on Business Interest Expense** Multiply adjusted taxable income (line 22) by 30% (0.30). See 26 26 instructions 27 27 Business interest income (line 25) 28 Floor plan financing interest expense (line 4) Total. Add lines 26, 27, and 28 29 29 Allowable Business Interest Expense 30 30 Total current year business interest expense deduction. See instructions Carryforward Disallowed business interest expense. Subtract line 29 from line 5. (If zero or less, enter -0-.) Part II Partnership Pass-Through Items Part II is only completed by a partnership that is subject to section 163(j). The partnership items below are allocated to the partners and are not carried forward by the partnership. See the instructions for more information. **Excess Business Interest Expense** 32 Excess business interest expense. Enter amount from line 31 Excess Taxable Income (If you entered an amount on line 32, skip lines 33 through 37.) Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0-.) 33 Subtract line 33 from line 26. (If zero or less, enter -0-.) 34 34 35 Divide line 34 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0-.) Excess Taxable Income. Multiply line 35 by line 22 36 **Excess Business Interest Income** 37 Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or Part III S Corporation Pass-Through Items Part III is only completed by S corporations that are subject to section 163(i). The S corporation items below are allocated to the shareholders. See the instructions for more information. **Excess Taxable Income** Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0-.) 38 Subtract line 38 from line 26. (If zero or less, enter -0-.) 39 39 Divide line 39 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0-.) 40 Excess Taxable Income. Multiply line 40 by line 22 41 **Excess Business Interest Income** Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or

Form **8990** (12-2018)

42

less, enter -0-.)

Form 8990 (12-2018)

SCHEDIU F A Summary of Partner's Section 163(i) Excess Items

3011	ILDULL A Summary St		511 155U, =x555	0 1101110						
Any ta	axpayer that owns an interest in a p	partnership subject to	o section 163(j) shoul	ld complete Sch	edule A l	before complet	ing Part I.			
	(a) Name of partnership	(b) EIN	(c) Current year	(d) Prior year carryforwa		(e) Total ((c) plus (d))	(f) Current year excess taxable income	(g) Current year excess business interest income	(h) Excess business interest expense treated as paid or accrued (lesser of (e) or (f))	(i) Current year excess business interest expense carryforward ((e) minus (h))
43	FROM PARTNERSHIP		47,999.		0.	47,999	. 0.	0.	0.	47,999.
44	Total						0.	0.	0.	
SCH	IEDULE B Summary of S	Corporation S	hareholder's Ex	cess Taxabl	e Incor	me and Exc	ess Business Int	erest Income		
•	axpayer that is required to complete e completing Part I.	e Part I and is a shar	eholder in an S corp	oration that has	excess ta	taxable income o	or excess business into	erest income should	complete Schedule	В
	(a) Name of S corporation					EIN	(c) Current year taxable inc		(d) Current y business inte	
45										

Form **8990** (12-2018)

Total

3800

General Business Credit

Attachment Sequence No. 22

OMB No. 1545-0895

Department of the Treasury Internal Revenue Service (99) ► Go to www.irs.gov/Form3800 for instructions and the latest information.

▶ You must attach all pages of Form 3800, pages 1, 2, and 3, to your tax return. Name(s) shown on return Identifying number

THE		94-2278431	
Part	Current Year Credit for Credits Not Allowed Against Tentative Minimum Tax (T	MT)	
	(See instructions and complete Part(s) III before Parts I and II.)		
1	General business credit from line 2 of all Parts III with box A checked	1	19
2	Passive activity credits from line 2 of all Parts III with box B checked 2 0		
3	Enter the applicable passive activity credits allowed for 2018. See instructions	3	0
4	Carryforward of general business credit to 2018. Enter the amount from line 2 of Part III with box C checked. See instructions for statement to attach	4	0
5	Carryback of general business credit from 2019. Enter the amount from line 2 of Part III with box D checked. See instructions	5	0
6	Add lines 1, 3, 4, and 5	6	19 00
Part	II Allowable Credit		
7	Regular tax before credits:		
	• Individuals. Enter the sum of the amounts from Form 1040, line 11a, and Schedule 2 (Form 1040), line 46, or the sum of the amounts from Form 1040NR, lines 42 and 44		
	Corporations. Enter the amount from Form 1120, Schedule J, Part I, line 2; or the		
	applicable line of your return	7	0
8	• Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G, lines 1a and 1b; or the amount from the applicable line of your return		
	• Individuals. Enter the amount from Form 6251, line 11		
	• Corporations. Enter -0	8	0
	Estates and trusts. Enter the amount from Schedule I (Form 1041), line 56		
9	Add lines 7 and 8	9	0 00
10a b	Foreign tax credit		
С	Add lines 10a and 10b	10c	0 00
11	Net income tax. Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on line 16	11	0 00
12	Net regular tax. Subtract line 10c from line 7. If zero or less, enter -0-		
13	Enter 25% (0.25) of the excess, if any, of line 12 over \$25,000. See instructions		
14	Tentative minimum tax:		
	 Individuals. Enter the amount from Form 6251, line 9 Corporations. Enter -0		
	Estates and trusts. Enter the amount from Schedule I (Form 1041), line 54		
15	Enter the greater of line 13 or line 14	15	
16	Subtract line 15 from line 11. If zero or less, enter -0	16	0 00
17	Enter the smaller of line 6 or line 16	17	
	C corporations: See the line 17 instructions if there has been an ownership change, acquisition, or reorganization.		
			ΛΛ

For Paperwork Reduction Act Notice, see separate instructions.

Form **3800** (2018)

Form 3800 (2018) Page **2**

Part	,			
lote:	If you are not required to report any amounts on line 22 or 24 below, skip lines 18 through 25 and e	nter -0	- on line 26.	
18	Multiply line 14 by 75% (0.75). See instructions	18	0	
19	Enter the greater of line 13 or line 18	19	0	00
20	Subtract line 19 from line 11. If zero or less, enter -0-	20	0	00
21	Subtract line 17 from line 20. If zero or less, enter -0-	21	0	00
22	Combine the amounts from line 3 of all Parts III with box A, C, or D checked	22		
23	Passive activity credit from line 3 of all Parts III with box B checked 23			
24	Enter the applicable passive activity credit allowed for 2018. See instructions	24		
25	Add lines 22 and 24	25	0	00
26	Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25	26	0	00
27	Subtract line 13 from line 11. If zero or less, enter -0	27	0	00
28	Add lines 17 and 26	28	0	00
29	Subtract line 28 from line 27. If zero or less, enter -0-	29	0	00
30	Enter the general business credit from line 5 of all Parts III with box A checked	30	411,007	
31	Reserved	31		
32	Passive activity credits from line 5 of all Parts III with box B checked 22			
33	Enter the applicable passive activity credits allowed for 2018. See instructions	33		
34	Carryforward of business credit to 2018. Enter the amount from line 5 of Part III with box C checked and line 6 of Part III with box G checked. See instructions for statement to attach	34		
35	Carryback of business credit from 2019. Enter the amount from line 5 of Part III with box D checked. See instructions	35		
36	Add lines 30, 33, 34, and 35	36	411,007	00
37	Enter the smaller of line 29 or line 36	37	0	00
38	Credit allowed for the current year. Add lines 28 and 37. Report the amount from line 38 (if smaller than the sum of Part I, line 6, and Part II, lines 25 and 36, see instructions) as indicated below or on the applicable line of your return. • Individuals. Schedule 3 (Form 1040), line 54, or Form 1040NR, line 51 • Corporations. Form 1120, Schedule J, Part I, line 5c • Estates and trusts. Form 1041, Schedule G, line 2b	38	0	00

Form 3800 (2018) Page 3 Name(s) shown on return Identifying number THE DAVID AND LUCILE PACKARD FOUNDATION 94-2278431 General Business Credits or Eligible Small Business Credits (see instructions) Complete a separate Part III for each box checked below. See instructions. General Business Credit From a Non-Passive Activity **E** Reserved В General Business Credit From a Passive Activity F Reserved С G \square Eligible Small Business Credit Carryforwards General Business Credit Carryforwards ☐ General Business Credit Carrybacks H Reserved If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from (b)
If claiming the credit from a pass-through entity, enter the EIN (a) Description of credit (c) Enter the appropriate Note: On any line where the credit is from more than one source, a separate Part III is needed for each amount pass-through entity. Investment (Form 3468, Part II only) (attach Form 3468) . . . 1a 1a b 1b С 1c d Low-income housing (Form 8586, Part I only) 1d Disabled access (Form 8826) (see instructions for limitation) 1e Renewable electricity, refined coal, and Indian coal production (Form 8835) 1f f 1g g 1h h 1i Small employer pension plan startup costs (Form 8881) (see instructions for limitation) 1j j Employer-provided child care facilities and services (Form 8882) (see k 1k ı Biodiesel and renewable diesel fuels (attach Form 8864) 11 m 1m Distilled spirits (Form 8906) n 1n Nonconventional source fuel (carryforward only) 10 0 Energy efficient home (Form 8908) 1p p Energy efficient appliance (carryforward only) q 1q Alternative motor vehicle (Form 8910) 1r s Alternative fuel vehicle refueling property (Form 8911) 1s Enhanced oil recovery credit (Form 8830) 1t t Mine rescue team training (Form 8923) 1u u Agricultural chemicals security (carryforward only) 1v Employer differential wage payments (Form 8932) 1w w Carbon oxide sequestration (Form 8933) 1x X Qualified plug-in electric drive motor vehicle (Form 8936) 1y У Qualified plug-in electric vehicle (carryforward only) 1z z Employee retention (Form 5884-A) 1aa aa bb General credits from an electing large partnership (Schedule K-1 (Form 1065-B)) 1bb Other. Oil and gas production from marginal wells (Form 8904) and certain 1zz 2 Add lines 1a through 1zz and enter here and on the applicable line of Part I 2 3 Enter the amount from Form 8844 here and on the applicable line of Part II 3 4a Investment (Form 3468, Part III) (attach Form 3468) 4a b 4b 4c С Low-income housing (Form 8586, Part II) d 4d 356 Renewable electricity, refined coal, and Indian coal production (Form 8835) 4e е 320,938 Employer social security and Medicare taxes paid on certain employee tips (Form 8846) 4f f 4q q 4h Small employer health insurance premiums (Form 8941) h Increasing research activities (Form 6765) 4i 89,713 Employer credit for paid family and medical leave (Form 8994) 4j j z 4z 5 5 411,007 00 Add lines 4a through 4z and enter here and on the applicable line of Part II 6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II 6 411,026 00

Form 3800 (2018) Page 3 Name(s) shown on return Identifying number THE DAVID AND LUCILE PACKARD FOUNDATION 94-2278431 General Business Credits or Eligible Small Business Credits (see instructions) Complete a separate Part III for each box checked below. See instructions. X General Business Credit From a Non-Passive Activity **E** Reserved В General Business Credit From a Passive Activity F Reserved С General Business Credit Carryforwards G \square Eligible Small Business Credit Carryforwards ☐ General Business Credit Carrybacks H Reserved If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from (b)
If claiming the credit from a pass-through entity, enter the EIN (a) Description of credit (c) Enter the appropriate Note: On any line where the credit is from more than one source, a separate Part III is needed for each amount pass-through entity. Investment (Form 3468, Part II only) (attach Form 3468) . . 1a 1a b 1b Increasing research activities (Form 6765) С 1c d Low-income housing (Form 8586, Part I only) **1d** 04-3455023 5 Disabled access (Form 8826) (see instructions for limitation) 1e Renewable electricity, refined coal, and Indian coal production (Form 8835) 1f f 1g g 1h h 1i Small employer pension plan startup costs (Form 8881) (see instructions for limitation) 1j j Employer-provided child care facilities and services (Form 8882) (see k 1k ı Biodiesel and renewable diesel fuels (attach Form 8864) 11 m Low sulfur diesel fuel production (Form 8896) 1m Distilled spirits (Form 8906) n 1n Nonconventional source fuel (carryforward only) 10 0 Energy efficient home (Form 8908) 1p p Energy efficient appliance (carryforward only) q 1q Alternative motor vehicle (Form 8910) 1r s Alternative fuel vehicle refueling property (Form 8911) 1s Enhanced oil recovery credit (Form 8830) 1t t Mine rescue team training (Form 8923) 1u u Agricultural chemicals security (carryforward only) 1v Employer differential wage payments (Form 8932) 1w w Carbon oxide sequestration (Form 8933) 1x X Qualified plug-in electric drive motor vehicle (Form 8936) 1y У Qualified plug-in electric vehicle (carryforward only) 1z z Employee retention (Form 5884-A) 1aa aa bb General credits from an electing large partnership (Schedule K-1 (Form 1065-B)) 1bb Other. Oil and gas production from marginal wells (Form 8904) and certain 1zz 2 Add lines 1a through 1zz and enter here and on the applicable line of Part I 2 3 Enter the amount from Form 8844 here and on the applicable line of Part II 3 4a Investment (Form 3468, Part III) (attach Form 3468) 4a b 4b С 4c Low-income housing (Form 8586, Part II) d 4d 04-3455023 117 Renewable electricity, refined coal, and Indian coal production (Form 8835) 4e е Employer social security and Medicare taxes paid on certain employee tips (Form 8846) 4f f 4q q 4h Small employer health insurance premiums (Form 8941) h Increasing research activities (Form 6765) 4i Employer credit for paid family and medical leave (Form 8994) 4j j z 4z 5 5 00 Add lines 4a through 4z and enter here and on the applicable line of Part II 6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II 6 122 00

Form 3800 (2018) Page 3 Name(s) shown on return Identifying number THE DAVID AND LUCILE PACKARD FOUNDATION 94-2278431 General Business Credits or Eligible Small Business Credits (see instructions) Complete a separate Part III for each box checked below. See instructions. X General Business Credit From a Non-Passive Activity **E** Reserved В ☐ General Business Credit From a Passive Activity F Reserved ☐ General Business Credit Carryforwards G \square Eligible Small Business Credit Carryforwards ☐ General Business Credit Carrybacks H Reserved If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from (b)
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Form 3800 (2018) Page 3 Name(s) shown on return Identifying number THE DAVID AND LUCILE PACKARD FOUNDATION 94-2278431 General Business Credits or Eligible Small Business Credits (see instructions) Complete a separate Part III for each box checked below. See instructions. □ General Business Credit From a Non-Passive Activity **E** Reserved В ☐ General Business Credit From a Passive Activity F Reserved С G \square Eligible Small Business Credit Carryforwards General Business Credit Carryforwards D ☐ General Business Credit Carrybacks H Reserved If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from (b)
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