Form	990-T	ו	OMB No. 1545-0047						
		Fer ee	(and proxy tax under section 6033(e))		2021				
		For ca	endar year 2021 or other tax year beginning, and ending	·	<b>Ζυζ</b> Ι				
Departi Internal	ment of the Treasury I Revenue Service		► Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).	ŀ	Open to Public Inspection for 501(c)(3) Organizations Only				
	Check box if		Name of organization ( Check box if name changed and see instructions.)		loyer identification number				
A	address changed.								
<b>B</b> Ex	empt under section	Print	THE DAVID AND LUCILE PACKARD FOUNDATION	_	4-2278431				
X	(= )(= )	or Type	Number, street, and room or suite no. If a P.O. box, see instructions. 343 SECOND STREET	E Group exemption number (see instructions)					
	408(e) 220(e) 408A 530(a)		City or town, state or province, country, and ZIP or foreign postal code	-					
	529(a) 529A		LOS ALTOS, CA 94022-3622	F	Check box if				
	1020(a)029A		ok value of all assets at end of year	┦╵└	an amended return.				
GC	beck organization		X     501(c) corporation     501(c) trust     401(a) trust     Other trust		an amended return.				
	Check if filing only to		Claim credit from Form 8941 Claim a refund shown on Form 2439						
			ation filing a consolidated return with a 501(c)(2) titleholding corporation						
-			ed Schedules A (Form 990-T)		1				
			e corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?		Yes X No				
			d identifying number of the parent corporation.						
	,		CRAIG NEYMAN, CFO Telephone number ► 6	550-	948-7658				
			d Business Taxable Income						
1	Total of unrelated	busine	ss taxable income computed from all unrelated trades or businesses (see						
	instructions)			1	94,030,563.				
2	Reserved			2					
3	Add lines 1 and 2			3	94,030,563.				
4	Charitable contrib	utions (	see instructions for limitation rules) STMT 10 STMT 11	4	9,402,956.				
5			taxable income before net operating losses. Subtract line 4 from line 3	5	84,627,607.				
6	Deduction for net	operati	ng loss. See instructions	6					
7	Total of unrelated	busine	ss taxable income before specific deduction and section 199A deduction.						
	Subtract line 6 from	m line 5	5	7	84,627,607.				
8	Specific deduction	n (gene	ally \$1,000, but see instructions for exceptions)	8	1,000.				
9	Trusts. Section 19	99A de	duction. See instructions	9					
10	Total deductions.	. Add li	nes 8 and 9	10	1,000.				
11	Unrelated busine	ss taxa	ble income. Subtract line 10 from line 7. If line 10 is greater than line 7,						
	enter zero			11	84,626,607.				
Par	t II Tax Com	putat	on						
1	Organizations tax	able a	s corporations. Multiply Part I, line 11 by 21% (0.21)	· 1	17,771,587.				
2	Trusts taxable at	trust r	ates. See instructions for tax computation. Income tax on the amount on						
	Part I, line 11 from	: L	Tax rate schedule or Schedule D (Form 1041)	2					
3	Proxy tax. See ins	structio	ns	3					
4	Other tax amounts	s. See i	nstructions	4					
5	Alternative minimu	ım tax (	trusts only)	5					
6			cility income. See instructions	6					
7	Total. Add lines 3	throug	h 6 to line 1 or 2, whichever applies	7	17,771,587.				
LHA	For Paperwork F	Reduct	ion Act Notice, see instructions.		Form <b>990-T</b> (2021)				

123701 07-06-22

	90-T (2021)			F	2 age
Part	III Tax and Payments				
1a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)				
b	Other credits (see instructions) SEE STATEMENT 13 1b 90.				
с	General business credit. Attach Form 3800 (see instructions)				
d	Credit for prior year minimum tax (attach Form 8801 or 8827) 1d				
е	Total credits. Add lines 1a through 1d	1e	1,15		
2	Subtract line 1e from Part II, line 7	2	16,62	0,9	34.
3	Other amounts due. Check if from: Form 4255 Form 8611 Form 8697 Form 8866				
	Other (attach statement)	3			
4	Total tax. Add lines 2 and 3 (see instructions).				
	section 1294. Enter tax amount here	4	16,62	0,9	34.
5	Current net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 4	5			0.
6a	Payments: A 2020 overpayment credited to 2021 6a 8,427,569.				
b	2021 estimated tax payments. Check if section 643(g) election applies				
с	Tax deposited with Form 8868 6c				
d	Foreign organizations: Tax paid or withheld at source (see instructions) 6d				
е	Backup withholding (see instructions) 6e				
f	Credit for small employer health insurance premiums (attach Form 8941)				
g	Other credits, adjustments, and payments: Form 2439				
	□ Form 4136 Other Total ► 6g				
7	Total payments. Add lines 6a through 6g	7	13,42	7,5	69.
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached	8			
9	Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed <b>STATEMENT</b> 14	9	3,19	3,3	65.
10	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid	10			
11	Enter the amount of line 10 you want: Credited to 2022 estimated tax  Refunded	11			
Part	IV Statements Regarding Certain Activities and Other Information (see instructions)			-	
1	At any time during the 2021 calendar year, did the organization have an interest in or a signature or other authority			Yes	No
	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				
	here <b>SEE STATEMENT 12</b>			X	
2	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a				
	foreign trust?				X
	If "Yes," see instructions for other forms the organization may have to file.				
3	Enter the amount of tax-exempt interest received or accrued during the tax year > \$				
4	Enter available pre-2018 NOL carryovers here <b>&gt;</b> \$ Do not include any post-2017 NOL carr	-			
	shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part	I, line	4.		
5	Post-2017 NOL carryovers. Enter available Business Activity Code and post-2017 NOL carryovers. Don't reduce				
	the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.				
	Business Activity Code Available post-2017 NOL ca			-	
	523000 \$ 10,8	/ð,	T0T.		
	\$				v
6a	Did the organization change its method of accounting? (see instructions)				X
b	If 6a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No,"				
	explain in Part V				

#### Part V Supplemental Information

Provide the explanation required by Part IV, line 6b. Also, provide any other additional information. See instructions.

Sign Here	correct, and complete. Declaration of preparer (oth	amined this return, including accompanying schedule ner than taxpayer) is based on all information of which CFO						
	Signature of officer	Date Title			instru	ictions)? X Yes No		
	Print/Type preparer's name	Preparer's signature	Date	Check	] if	PTIN		
Paid				self- employed				
Preparer	SARAH REDDEN	Sarah Redden	11/10/2022			P00898534		
Use Only		TAX LLP				86-1065772		
	50 SOUT	H SIXTH STREET	IXTH STREET					
	Firm's address <b>MINNEAP</b>	Phone no.	61	2-397-4000				
Firm's address         MINNEAPOLIS, MN 55402           123711 01-31-22         01-31-22						Form <b>990-T</b> (2021)		
		221						

#### 16371103 149058 PACKARD

#### THE DAVID AND LUCILE PACKARD FOUNDATION

FORM 990-T	L	ATE	PAYMENT IN	ITERE	ST		STA	TEMENT 8
DESCRIPTION	DATE	A	MOUNT	BAI	JANCE	RATE	DAYS	INTEREST
TAX DUE INTEREST RATE CHANGE	05/16/22 06/30/22	8,	.193,365. 0.		L93,365. 233,868.	.0400	45 68	40,503. 77,052.
PAYMENT INTEREST RATE CHANGE DATE FILED	09/06/22 09/30/22 11/15/22	-5,	.000,000. 0.	3,3	310,920. 321,822. 347,033.	.0500 .0600	24 46	10,902. 25,211.
TOTAL LATE PAYMENT IN	TEREST							153,668.
FORM 990-T	LA	TE F	AYMENT PEN	IALTY	7		STA	TEMENT 9
DESCRIPTION	DAT	Έ	AMOUNT		BALANCE	MO	NTHS	PENALTY
TAX DUE PAYMENT DATE FILED	05/16 09/06 11/15	/22	8,193,30 -5,000,00		8,193,3 3,193,3 3,193,3	65.	4 2	163,867. 31,934.
TOTAL LATE PAYMENT PE	NALTY						=	195,801.
FORM 990-T		CON	ITRIBUTIONS	3			STA	TEMENT 10
DESCRIPTION/KIND OF P	ROPERTY	мет	HOD USED T	O DE	TERMINE	FMV	i	AMOUNT
FROM PARTNERSHIPS OTHER CONTRIBUTIONS		N/A N/A					35	27,107, 7,421,354

16371103 149058 PACKARD

TOTAL TO FORM 990-T, PART I, LINE 4

94 - 2278431

357,448,461.

FORM 990-T	CONTRIBUTIONS	SIIMMARV		STATEMENT	11
	CONTRIBUTION	DOMINICI		DIAIDHINI	**
	CONTRIBUTIONS SUBJECT TO 100% CONTRIBUTIONS SUBJECT TO 25%				
FOR TAX FOR TAX FOR TAX FOR TAX	OF PRIOR YEARS UNUSED CONTRIB YEAR 2016 YEAR 2017 YEAR 2018 YEAR 2019 YEAR 2020	UTIONS			
TOTAL CARR TOTAL CURR	YOVER ENT YEAR 10% CONTRIBUTIONS		357,448,461		
	RIBUTIONS AVAILABLE COME LIMITATION AS ADJUSTED		357,448,461 9,402,956	_	
EXCESS 100	TRIBUTIONS % CONTRIBUTIONS SS CONTRIBUTIONS		348,045,505 0 348,045,505	_	
ALLOWABLE	CONTRIBUTIONS DEDUCTION			9,402,	956
TOTAL CONT	RIBUTION DEDUCTION			9,402,	956

FORM 990-T	NAME OF FOREIGN COUNTRY IN WHICH ORGANIZATION HAS FINANCIAL INTEREST	STATEMENT 12
NAME OF COUNTRY		
UNITED KINGDOM IRELAND NETHERLANDS INDIA MAURITIUS POLAND JERSEY CAYMAN ISLANDS BRITISH VIRGIN IS:	LANDS	
HONG KONG		
FORM 990-T	OTHER CREDITS	STATEMENT 13
DESCRIPTION		AMOUNT
FROM FORM 8978		90.
FOTAL TO FORM 990	-T, PAGE 2, PART III, LINE 1B	90.
FORM 990-T	INTEREST AND PENALTIES	STATEMENT 14
FORM 990-T TAX FROM FORM 99 LATE PAYMENT II LATE PAYMENT P	0-T, PART IV NTEREST	STATEMENT 14 3,193,365, 153,668, 195,801,

SCHE	DULE A
(Form	990-T)

Department of the Treasury

Internal Revenue Service

# Unrelated Business Taxable Income From an Unrelated Trade or Business

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

OMB No. 1545-0047

# 2021

Open to Public Inspection for 501(c)(3) Organizations Only

1

A Name of the organization

ation B

## THE DAVID AND LUCILE PACKARD FOUNDATION

<u>c</u> Unrelated business activity code (see instructions) ► 523000

B Employer identification number 94-2278431

of

1

**D** Sequence:

#### E Describe the unrelated trade or business **INVESTMENTS IN PARTNERSHIPS**

Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net	
oss receipts or sales c Balance ►	1c			
st of goods sold (Part III, line 8)	2			
pital gain net income (attach Sch D (Form 1041 or Form	3 4a	32,824,037.		32,824,037.
t gain (loss) (Form 4797) (attach Form 4797). See instructions)	4b 4c			
come (loss) from a partnership or an S corporation (attach	5	72,086,306.		72,086,306.
nt income (Part IV)	6			
related debt-financed income (Part V)	7			
erest, annuities, royalties, and rents from a controlled ganization (Part VI)	8			
restment income of section 501(c)(7), (9), or (17) ganizations (Part VII)	9			
ploited exempt activity income (Part VIII)	10			
vertising income (Part IX)	11			
her income (see instructions; attach statement)	12			
tal. Combine lines 3 through 12	13	104910343.		104910343.
	s returns and allowances c Balance ► st of goods sold (Part III, line 8) poss profit. Subtract line 2 from line 1c pital gain net income (attach Sch D (Form 1041 or Form 20)). See instructions t gain (loss) (Form 4797) (attach Form 4797). See instructions) pital loss deduction for trusts ome (loss) from a partnership or an S corporation (attach tement) STATEMENT 15 nt income (Part IV) related debt-financed income (Part V) erest, annuities, royalties, and rents from a controlled anization (Part VI) estment income of section 501(c)(7), (9), or (17) anizations (Part VII) ploited exempt activity income (Part VIII) vertising income (Part IX) ner income (see instructions; attach statement)	s returns and allowances       c       Balance       1c         st of goods sold (Part III, line 8)       2       3         pass profit. Subtract line 2 from line 1c       3       3         poital gain net income (attach Sch D (Form 1041 or Form 20)). See instructions       4a         t gain (loss) (Form 4797) (attach Form 4797). See instructions)       4b         poital loss deduction for trusts       4c         come (loss) from a partnership or an S corporation (attach tement)       5         t income (Part IV)       6         related debt-financed income (Part V)       7         erest, annuities, royalties, and rents from a controlled anization (Part VI)       8         estiment income of section 501(c)(7), (9), or (17)       9         polited exempt activity income (Part VIII)       10         vertising income (Part IX)       11         ner income (see instructions; attach statement)       12         tal. Combine lines 3 through 12       13	s returns and allowances c Balance ► 1c 2 st of goods sold (Part III, line 8) 2 Dess profit. Subtract line 2 from line 1c 3 Dital gain net income (attach Sch D (Form 1041 or Form 20)). See instructions 4a 32,824,037. 4a 32,824,037. 4a 32,824,037. 4b 4c 4c 4c 4b 4c	s returns and allowances c Balance 1c 2222222222222222222222222222222222

Part II Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income

1	Compensation of officers, directors, and trustees (Part X)	1			
2	Salaries and wages	2			
3	Repairs and maintenance	3			
4	Bad debts			4	
5	Interest (attach statement). See instructions			5	
6	Taxes and licenses			6	1,599.
7	Depreciation (attach Form 4562). See instructions Less depreciation claimed in Part III and elsewhere on return				
8	Less depreciation claimed in Part III and elsewhere on return	8b			
9	Depletion	9			
10	Contributions to deferred compensation plans			10	
11	Employee benefit programs				
12	Excess exempt expenses (Part VIII)				
13	Excess readership costs (Part IX)			13	
14	Other deductions (attach statement)			14	
15	Total deductions. Add lines 1 through 14			15	1,599.
16	Unrelated business income before net operating loss deduction. Subtract line 15 from	Part	I, line 13,		
	column (C)			16	104908744.
17	Deduction for net operating loss. See instructions	ST	ATEMENT 16	17	10,878,181.
18	Unrelated business taxable income. Subtract line 17 from line 16		<u></u>	18	94,030,563.
LHA	For Paperwork Reduction Act Notice, see instructions.			Schedu	le A (Form 990-T) 2021

Part	le A (Form 990-T) 2021				Page 2
4		method of inventory valuation			
1 2					
2	PurchasesCost of labor				
4	Additional section 263A costs (attach statement)				
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5				
7					
8	Cost of goods sold. Subtract line 7 from line 6. En				
9	Do the rules of section 263A (with respect to prope				Yes No
Part		•	-		
1	Description of property (property street address, ci	ty, state, ZIP code). Check i	f a dual-use. See instru	actions.	
	A				
	B				
	с [				
	D	A	В	С	D
2	Rent received or accrued		J		
a	From personal property (if the percentage of				
	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the	4			
	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)				
С	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				
4	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)				
4 5 Part 1	in lines 2(a) and 2(b) (attach statement)	). Enter here and on Part I, li (see instructions)			0.
5 Part	in lines 2(a) and 2(b) (attach statement)  Total deductions. Add line 4 columns A through D Unrelated Debt-Financed Income Description of debt-financed property (street addre	). Enter here and on Part I, li (see instructions)			0.
5 Part	in lines 2(a) and 2(b) (attach statement)  Total deductions. Add line 4 columns A through I Unrelated Debt-Financed Income Description of debt-financed property (street addre A	). Enter here and on Part I, li (see instructions)			0.
5 Part	in lines 2(a) and 2(b) (attach statement)  Total deductions. Add line 4 columns A through D Unrelated Debt-Financed Income Description of debt-financed property (street addre B B	). Enter here and on Part I, li (see instructions)			0.
5 Part 1	in lines 2(a) and 2(b) (attach statement)	). Enter here and on Part I, li (see instructions)			0. 
5 Part	in lines 2(a) and 2(b) (attach statement)	D. Enter here and on Part I, li (see instructions) ss, city, state, ZIP code). Ch	neck if a dual-use. See	instructions.	
5 Part 1	in lines 2(a) and 2(b) (attach statement)	D. Enter here and on Part I, li (see instructions) ss, city, state, ZIP code). Ch	neck if a dual-use. See	instructions.	
5 Part 1	in lines 2(a) and 2(b) (attach statement)  Total deductions. Add line 4 columns A through E Unrelated Debt-Financed Income Description of debt-financed property (street addre A B C C G Gross income from or allocable to debt-financed property Deductions directly connected with or allocable	D. Enter here and on Part I, li (see instructions) ss, city, state, ZIP code). Ch	neck if a dual-use. See	instructions.	
5 Part 1 1 2 3	in lines 2(a) and 2(b) (attach statement)	D. Enter here and on Part I, li (see instructions) ss, city, state, ZIP code). Ch	neck if a dual-use. See	instructions.	
5 Part 1 1 2 3 a	in lines 2(a) and 2(b) (attach statement)  Total deductions. Add line 4 columns A through E Unrelated Debt-Financed Income Description of debt-financed property (street addre B C C D Gross income from or allocable to debt-financed property Deductions directly connected with or allocable to debt-financed property Straight line depreciation (attach statement)	D. Enter here and on Part I, li (see instructions) ss, city, state, ZIP code). Ch	neck if a dual-use. See	instructions.	
5 Part 1 1 2 3	in lines 2(a) and 2(b) (attach statement)  Total deductions. Add line 4 columns A through E Unrelated Debt-Financed Income Description of debt-financed property (street addre B C C C C C C C C C C C C C C C C C C	D. Enter here and on Part I, li (see instructions) ss, city, state, ZIP code). Ch	neck if a dual-use. See	instructions.	
5 Part 1 1 2 3 a b	in lines 2(a) and 2(b) (attach statement)  Total deductions. Add line 4 columns A through E Unrelated Debt-Financed Income Description of debt-financed property (street addre A B C C C C C C C C C C C C C C C C C C	D. Enter here and on Part I, Ii (see instructions) ss, city, state, ZIP code). Cr	neck if a dual-use. See	instructions.	
5 Part 1 1 2 3 a b	in lines 2(a) and 2(b) (attach statement)  Total deductions. Add line 4 columns A through E Unrelated Debt-Financed Income Description of debt-financed property (street addre B C C C C C C C C C C C C C C C C C C	D. Enter here and on Part I, li (see instructions) ss, city, state, ZIP code). Cr	neck if a dual-use. See	instructions.	
5 Part 1 2 3 a b c	in lines 2(a) and 2(b) (attach statement)	2. Enter here and on Part I, Ii (see instructions) ss, city, state, ZIP code). Cr	neck if a dual-use. See	instructions.	
5 Part 1 2 3 a b c	in lines 2(a) and 2(b) (attach statement)  Total deductions. Add line 4 columns A through D Unrelated Debt-Financed Income Description of debt-financed property (street addre A B C C D C Gross income from or allocable to debt-financed property Deductions directly connected with or allocable to debt-financed property Straight line depreciation (attach statement) Other deductions (atdach statement) Total deductions (add lines 3a and 3b, columns A through D) Amount of average acquisition debt on or allocable	2. Enter here and on Part I, Ii (see instructions) ss, city, state, ZIP code). Cr	neck if a dual-use. See	instructions.	
5 Part 1 1 2 3 a b c 4	in lines 2(a) and 2(b) (attach statement)  Total deductions. Add line 4 columns A through E Unrelated Debt-Financed Income Description of debt-financed property (street addre A B C C D Gross income from or allocable to debt-financed property Deductions directly connected with or allocable to debt-financed property Straight line depreciation (attach statement) Other deductions (atdach statement) Total deductions (add lines 3a and 3b, columns A through D) Amount of average acquisition debt on or allocable to debt-financed property (attach statement) Average adjusted basis of or allocable to debt-financed property	D. Enter here and on Part I, li (see instructions) ss, city, state, ZIP code). Cr	B B	instructions.	D
5 Part 1 1 2 3 a b c 4	in lines 2(a) and 2(b) (attach statement)  Total deductions. Add line 4 columns A through E Unrelated Debt-Financed Income Description of debt-financed property (street addre A B C C C C C C C C C C C C C C C C C C	D. Enter here and on Part I, Ii         (see instructions)         ss, city, state, ZIP code). Ch         A         A	neck if a dual-use. See	instructions.	D
5 Part 1 1 2 3 a b c 4 5 4 5 6 7	in lines 2(a) and 2(b) (attach statement)  Total deductions. Add line 4 columns A through E Unrelated Debt-Financed Income Description of debt-financed property (street addre  A B C C C C C C C C C C C C C C C C C	D. Enter here and on Part I, Ii (see instructions) ss, city, state, ZIP code). Cr	B 8 %	C	D
5 Part 1 1 2 3 a b c 4 5 6	in lines 2(a) and 2(b) (attach statement)  Total deductions. Add line 4 columns A through E Unrelated Debt-Financed Income Description of debt-financed property (street addre A B C C C C C C C C C C C C C C C C C C	D. Enter here and on Part I, Ii (see instructions) ss, city, state, ZIP code). Cr	B 8 %	C	D
5 Part 1 2 3 a b c 4 5 4 5 6 7 8	in lines 2(a) and 2(b) (attach statement)  Total deductions. Add line 4 columns A through E Unrelated Debt-Financed Income Description of debt-financed property (street addre B C C D Gross income from or allocable to debt-financed property Deductions directly connected with or allocable to debt-financed property Straight line depreciation (attach statement) Other deductions (attach statement) Total deductions (attach statement) Total deductions (add lines 3a and 3b, columns A through D) Amount of average acquisition debt on or allocable to debt-financed property (attach statement) Average adjusted basis of or allocable to debt- financed property (attach statement) Divide line 4 by line 5 Gross income reportable. Multiply line 2 by line 6 Total gross income (add line 7, columns A through	D. Enter here and on Part I, Ii (see instructions) ss, city, state, ZIP code). Cr	B 8 %	C	D
5 Part 1 2 3 a b c 4 5 4 5 6 7 8 9	in lines 2(a) and 2(b) (attach statement)  Total deductions. Add line 4 columns A through E Unrelated Debt-Financed Income Description of debt-financed property (street addre B C C D Gross income from or allocable to debt-financed property Deductions directly connected with or allocable to debt-financed property Straight line depreciation (attach statement) Other deductions (atdach statement) Total deductions (add lines 3a and 3b, columns A through D) Amount of average acquisition debt on or allocable to debt-financed property (attach statement) Average adjusted basis of or allocable to debt- financed property (attach statement) Divide line 4 by line 5 Gross income reportable. Multiply line 2 by line 6 Total gross income (add line 7, columns A throug Allocable deductions. Multiply line 3c by line 6	D. Enter here and on Part I, Ii (see instructions) ss, city, state, ZIP code). Cr	B B % 1, line 7, column (A)	instructions.	D ////////////////////////////////////
5 Part 1 2 3 a b c 4 5 4 5 6 7 8	in lines 2(a) and 2(b) (attach statement)  Total deductions. Add line 4 columns A through E Unrelated Debt-Financed Income Description of debt-financed property (street addre B C C D Gross income from or allocable to debt-financed property Deductions directly connected with or allocable to debt-financed property Straight line depreciation (attach statement) Other deductions (attach statement) Total deductions (attach statement) Total deductions (add lines 3a and 3b, columns A through D) Amount of average acquisition debt on or allocable to debt-financed property (attach statement) Average adjusted basis of or allocable to debt- financed property (attach statement) Divide line 4 by line 5 Gross income reportable. Multiply line 2 by line 6 Total gross income (add line 7, columns A through	D. Enter here and on Part I, Ii (see instructions) ss, city, state, ZIP code). Cr	B B % 1, line 7, column (A)	instructions.	D

### 16371103 149058 PACKARD

226 2021.05000 THE DAVID AND LUCILE PACK PACKARD2

1

												1
	ule A (Form 990-T) 2021 VI Interest, Annu		valties, and Re	ents fron	n Control	led Or	ganization	<b>S</b> (se	ee instruct	ions)		Page 3
	•••		<b>,</b>				Exempt Contro	(		/		
	1. Name of controlled organization	d	<b>2.</b> Employer identification number			payments made		and the second se		d in the janiza-		ted with
(1)					· · · ·				5 gr035 mc	ome		
(2)												
(3)												
(4)												
			No	nexempt C	Controlled O	rganizati	ons					
7	. Taxable Income	in	Net unrelated come (loss) e instructions)		otal of specif yments mad		<b>10.</b> Part of that is inclusion controlling gross	luded	in the zation's		Deduction connected come in col	with
(1)												
(2)												
(3)												
(4)												
<b>T</b> . 1 . 1 .							Add colum Enter here line 8, c	and or	n Part I,	Ente	d columns 6 er here and line 8, colur	on Part I,
Totals Part		Income	of a Section 50	1(c)(7) (9	9) or (17)	Organ	jization (*					0.
1 011		cription of i		<u>(()</u> (), (	2. Amou incor	nt of	3. Deduction directly conne (attach state)	ons ected	ructions) <b>4.</b> Set- (attach st		nt) and s	deductions et-asides ols 3 and 4)
(1)												
(2)												
(3)												
(4) Totals					Add amor column 2 here and o line 9, colu	. Enter n Part I, umn (A) <b>0</b> •					colum here ar	amounts in nn 5. Enter nd on Part I, column (B) <b>0 .</b>
Part			ctivity Income	, Other T	han Adve	ertising	g Income	(see ins	structions)			
1	Description of exploite											
2	Gross unrelated busin									2		
3	Expenses directly con											
										3		
4	Net income (loss) from											
-	lines 5 through 7									4		
5	Gross income from ac									5		
6 7	Expenses attributable Excess exempt expense									6		
7										7		
	4. Enter here and on P	art II, III le	12		·····					1		

Schedule A (Form 990-T) 2021

123731 01-28-22

Sched	ule A (Form 990-T) 2021				1 Page <b>4</b>
Part					5
1	Name(s) of periodical(s). Check box if reporting two	or more periodicals on a c	onsolidated basis.		
	Α				
	В				
	с 🔄				
	D				
Enter a	amounts for each periodical listed above in the corresp	oonding column.			
		A	В	c	D
2	Gross advertising income				
	Add columns A through D. Enter here and on Part I,	line 11, column (A)		►	0.
а					
3	Direct advertising costs by periodical				
а	Add columns A through D. Enter here and on Part I,	line 11, column (B)		►	0.
4	Advertising gain (loss). Subtract line 3 from line				
	2. For any column in line 4 showing a gain,				
	complete lines 5 through 8. For any column in				
	line 4 showing a loss or zero, do not complete				
	lines 5 through 7, and enter zero on line 8				
5	Readership costs				
6	Circulation income				
7	Excess readership costs. If line 6 is less than	4			
	line 5, subtract line 6 from line 5. If line 5 is less				
	than line 6, enter zero				
8	Excess readership costs allowed as a				
	deduction. For each column showing a gain on				
	line 4, enter the lesser of line 4 or line 7				
а	Add line 8, columns A through D. Enter the greater of	of the line 8a, columns tot	al or zero here and o	on	
	Part II, line 13			<b>&gt;</b>	0.
Part	X Compensation of Officers, Director	rs, and Trustees (se	ee instructions)		
				3. Percentage	4. Compensation
	1. Name	2. Title		of time devoted	attributable to
				to business	unrelated business
(1)	~			%	
(2)				%	
(3)				%	
(4)				%	
_					0
	Enter here and on Part II, line 1			▶	0.
Part	XI Supplemental Information (see instru	uctions)			

123732 01-28-22

THE	DAVID	AND	LUCILE	PACKARD	FOUNDATION

FORM 990-T (A)	INCOME (LOSS) FROM PARTNE	RSHIPS STATEMENT 15
DESCRIPTION		NET INCOME OR (LOSS)
	DINARY BUSINESS INCOME (LOSS HER INCOME (LOSS)	) 72,115,986. -29,680.
TOTAL INCLUDED ON SCHI	EDULE A, PART I, LINE 5	72,086,306.
FORM 990-T (A)	POST 2017 NOL SCHEDUL	E STATEMENT 16
PRIOR YEAR POST 2017 NOL	NOL DEDUCTION	CARRYFORWARD OF POST 2017 NOL
10,878,181.	10,878,181.	0.

990-T SCH	A POST-201	7 NET OPERATING	LOSS DEDUCTION	STATEMENT 17
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/20 12/31/19 12/31/18	2,433,965. 4,648,424. 3,795,792.	0.0.0.	2,433,965. 4,648,424. 3,795,792.	2,433,965. 4,648,424. 3,795,792.
NOL CARRY	OVER AVAILABLE THIS	YEAR	10,878,181.	10,878,181.

Department of the Treasury Internal Revenue Service

#### Name

### THE DAVID AND LUCILE PACKARD FOUNDATION

Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? ......... If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less								
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you	(d) Proceeds (sales price)	<b>(e)</b> Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part I, line 2, column (	49,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the			
round off cents to whole dollars.	(sales price)			(g)	result with column (g)			
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								
<b>1b</b> Totals for all transactions reported on								
Form(s) 8949 with <b>Box A</b> checked								
2 Totals for all transactions reported on								
Form(s) 8949 with <b>Box B</b> checked								
<b>3</b> Totals for all transactions reported on								
Form(s) 8949 with <b>Box C</b> checked					465,838.			
4 Short-term capital gain from installment sales	from Form 6252, line 26 or 3	7		4				
5 Short-term capital gain or (loss) from like-kin				5				
6 Unused capital loss carryover (attach comput	ation)			6	()			
7 Net short-term capital gain or (loss). Combin	e lines 1a through 6 in columr	h		7	465,838.			
Part II Long-Term Capital Gai	ns and Losses - Ass	ets Held More Than	One Year					
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you	(d) Proceeds (sales price)	<b>(e)</b> Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part II, line 2, column	49,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the			
round off cents to whole dollars.	(sales price)		Fart II, III e 2, column	(9)	result with column (g)			
8a 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 line 8b								
8b Totals for all transactions reported on								
Form(s) 8949 with <b>Box D</b> checked								
9 Totals for all transactions reported on								
Form(s) 8949 with <b>Box E</b> checked								
10 Totals for all transactions reported on								
Form(s) 8949 with <b>Box F</b> checked					23,093,319.			
				11	9,264,880.			
12 Long-term capital gain from installment sales				12				
13 Long-term capital gain or (loss) from like-kin	d exchanges from Form 8824			13				
14 Capital gain distributions				14				
15 Net long-term capital gain or (loss). Combine	e lines 8a through 14 in colum	nh		15	32,358,199.			
Part III Summary of Parts I and								
16 Enter excess of net short-term capital gain (lin				16	465,838.			
17 Net capital gain. Enter excess of net long-tern				17	32,358,199.			
<b>18</b> Add lines 16 and 17. Enter here and on Form	1120, page 1, line 8, or the ap	plicable line on other returns		18	32,824,037.			

Capital Gains and Losses ► Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T. ► Go to www.irs.gov/Form1120 for instructions and the latest information.

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

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

Schedule D (Form 1120) 2021

121051 12-17-21

#### 16371103 149058 PACKARD

OMB No. 1545-0123

Yes X No

2021

Employer identification number

94-2278431

►L

Form <b>8949</b>	
Department of the Treasury Internal Revenue Service	/

Name(s) shown on return

# **Sales and Other Dispositions of Capital Assets**

► 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.



12A

Seauence No Social security number or taxpaver identification no.

THE DAVID AND	LUCILE PA	ACKARD FO	OUNDATION			94-2	278431
Before you check Box A, B, or C belo statement will have the same information	ow, see whether ation as Form 109			r substitute statem basis (usually you	ent(s) from y r cost) was re		
broker and may even tell you which be           Part I         Short-Term. Transaction		al assets you held	1 year or less are ger	nerally short-term (see	e instructions).	. For long-term	
transactions, see page 2. <b>Note:</b> You may aggregate all codes are required. Enter the	l short-term transac	tions reported on I	Form(s) 1099-B show	ing basis was reporte	d to the IRS a	and for which no ac	ljustments or ctions).
You must check Box A, B, or C below. O	Check only one bo	x. If more than one b	oox applies for your short	-term transactions, comp	lete a separate F	orm 8949, page 1, for	,
(A) Short-term transactions rep					-		
(B) Short-term transactions rep	ported on Form(s	) 1099-B showin	ig basis <b>wasn't</b> re	ported to the IRS			
X (C) Short-term transactions no	t reported to you	on Form 1099-	В				1
1 (a)	(b)	(c)	(d)	(e)	Adjustment,	if any, to gain or enter an amount	(h)
Description of property	Date acquired	Date sold or	Proceeds (sales price)	Cost or other basis. See the	in column (g	g), enter a code in	Gain or (loss). Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	· · · /	Note below and	()	See instructions.	from column (d) &
				see Column (e) in the instructions	(f) Code(s)	(g) Amount of	combine the result with column (g)
FROM PARTNERSHIP						adjustment	465,838.
FROM FARINERSHIP							405,050.
				7			
							ļ
2 Totals. Add the amounts in colur							
negative amounts). Enter each to							
Schedule D, line 1b (if Box A abo							165 020
above is checked), or line 3 (if B						ported to the IDC	465,838.
Note: If you checked Box A above b	ul lie Dasis 1800		was incorrect, ente	n in column (e) lhe	Jasis as 16		, and enter all

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

245

16371103 149058 PACKARD

Form 8949 (2021)				Attachn	nent Sequen	ice No. 12A	Page <b>2</b>
Name(s) shown on return. Name and	I SSN or taxpaye	er identification n	io. not required if s	shown on page 1			ity number or ntification no.
THE DAVID AND	LUCILE PA	ACKARD FO	OUNDATION			94-2	278431
Before you check Box D, E, or F belo statement will have the same informa	ow, see whether ation as Form 10	you received any 99-B. Either will :	r Form(s) 1099-B o show whether you	r substitute statem r basis (usually you	ent(s) from y r cost) was r	our broker. A sur eported to the IF	bstitute S by your
<b>Part II</b> Long-Term. Transaction see page 1.		al assets you held r	more than 1 year are	generally long-term (s	see instruction	s). For short-term t	ransactions,
Note: You may aggregate all	long-term transact	tions reported on F	orm(s) 1099-B showi	ng basis was reporte	d to the IRS a	nd for which no adj	ustments or
codes are required. Enter the You must check Box D, E, or F below. C	Check only one bo	x. If more than one b	ox applies for your long-	term transactions, compl	lete a separate F	orm 8949, page 2, for e	
If you have more long-term transactions than will					-		
(D) Long-term transactions rep	•		•	•	Note abov	(e)	
(E) Long-term transactions rep	· · ·	· · · · · · · · · · · · · · · · · · ·	•	ported to the IRS			
1 (a)	(b)	(c)	(d)	(e)	Adjustment	if any, to gain or	(h)
Description of property	Date acquired	Date sold or	Proceeds	Cost or other	loss. If you	i enter an amount	Gain or (loss).
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of	(sales price)	basis. See the	column (f).	g), enter a code in <b>See instructions</b> .	Subtract column (e)
		(Mo., day, yr.)		Note below and	(#)	(g)	from column (d) & combine the result
				see Column (e) in the instructions	Code(s)	Amount of adjustment	with column (g)
FROM PARTNERSHIP						aujustment	23,093,319.
<b>2 Totals.</b> Add the amounts in colur							
negative amounts). Enter each to		2					
Schedule D, <b>line 8b</b> (if <b>Box D</b> abo							23 002 210
above is checked), or <b>line 10</b> (if E					la a sia a sa		23,093,319.
Note: If you checked Box D above b adjustment in column (g) to correct t							

Form <b>4797</b>
Department of the Treasury

Internal Revenue Service Name(s) shown on return

#### 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.

Sequence No. 27

THE DAVID AND LUCILE PACKARD FOUNDATION		94-2278431
<b>1a</b> Enter the gross proceeds from sales or exchanges reported to you for 2021 on Form(s) 1099-B or 1099-S		
(or substitute statement) that you are including on line 2, 10, or 20	1a	
b Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of		
MACRS assets	1b	
c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS		
assets	1c	

 
 Part I
 Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft-Most Property Held More Than 1 Year (see instructions)

2	(a) Description of property	(b) Date acquired (mo., day, yr.)	<b>(C)</b> Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or othe basis, plus improvements ar expense of sale	nd	<b>(g)</b> Gain or (loss) Subtract (f) from the sum of (d) and (e)
FR	OM PARTNERSHIP							9,264,880.
3							3	
4	Section 1231 gain from installment sa	ales from Form 6	252, line 26 or 3	7			4	
5	Section 1231 gain or (loss) from like-k	ind exchanges f	rom Form 8824				5	
6	Gain, if any, from line 32, from other t						6	
7	Combine lines 2 through 6. Enter the	gain or (loss) hei	re and on the ap	propriate line as fo	llows		7	9,264,880.
	<b>Partnerships and S corporations.</b> R line 10, or Form 1120-S, Schedule K,				r Form 1065, Sche	edule K,		
	Individuals, partners, S corporation	shareholders, a	and all others.	If line 7 is zero or a	loss. enter the am	nount		
	from line 7 on line 11 below and skip							
	1231 losses, or they were recaptured				ng-term capital gai	n on		
	the Schedule D filed with your return	and skip lines 8,	9, 11, and 12 be	elow.				
8	Nonrecaptured net section 1231 loss	es from prior yea	ars. See instructi	ons			8	
9	Subtract line 8 from line 7. If zero or le							
	line 9 is more than zero, enter the am							
	capital gain on the Schedule D filed w	/ith your return. S	See instructions				9	9,264,880.
Pa	rt II Ordinary Gains and L	OSSES (see in	structions)					
10	Ordinary gains and losses not includ	ed on lines 11 th	rough 16 (inclue	de property held 1	year or less):			
11							11	( )
12	Gain, if any, from line 7 or amount fro	m line 8, if applic	able				12	
13	Gain, if any, from line 31						13	
14	Net gain or (loss) from Form 4684, line						14	
15	Ordinary gain from installment sales f	rom Form 6252,	line 25 or 36				15	
16	Ordinary gain or (loss) from like-kind e	exchanges from I	orm 8824				16	
17	Combine lines 10 through 16					<u>·</u>	17	
18	For all except individual returns, enter	r the amount from	n line 17 on the	appropriate line of	your return and sk	kip lines		
	a and b below. For individual returns,	complete lines a	a and b below.					
а	If the loss on line 11 includes a loss fr	rom Form 4684,	line 35, column (	(b)(ii), enter that pa	rt of the loss here.	Enter the		
	loss from income-producing property	on Schedule A (	Form 1040), line	16. (Do not include	e any loss on prop	erty used		
	as an employee.) Identify as from "Fo	rm 4797, line 18	a." See instructio	ons		1	8a	
b	Redetermine the gain or (loss) on line	17 excluding the	e loss, if any, on	line 18a. Enter her	e and on Schedule	e1		
	(Form 1040), Part I, line 4					1	8b	

LHA **For Paperwork Reduction Act Notice, see separate instructions.** 118011 12-17-21 Form 4797 (2021)

233 1 05000 mue Davie :

Part III	Gain From Dispe	osition of Proper	y Under Sections	1245, 1250, 12	252, 1254, and 1255	(see instructions)
----------	-----------------	-------------------	------------------	----------------	---------------------	--------------------

19	(a) Description of section 1245, 1250, 1252, 1254, c	<b>(b)</b> Date acquired (mo., day, yr.)	<b>(c)</b> Date sold (mo., day, yr.)			
A						
В						
С						
D						
	These columns relate to the properties on					
	lines 19A through 19D.		Property A	Property B	Property C	Property D
20	Gross sales price ( <b>Note:</b> See line 1a before completing.)	20				
21	Cost or other basis plus expense of sale	21				
22	Depreciation (or depletion) allowed or allowable	22				
23	Adjusted basis. Subtract line 22 from line 21	23				
24	Total gain. Subtract line 23 from line 20	24				
25	If section 1245 property:					
	Depreciation allowed or allowable from line 22	25a				
	Enter the smaller of line 24 or 25a	25b				
26	<b>If section 1250 property:</b> If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.					
a	Additional depreciation after 1975. See instructions	26a	4			
k	Applicable percentage multiplied by the <b>smaller</b> of line 24 or line 26a. See instructions	26b				
c	Subtract line 26a from line 24. If residential rental property <b>or</b> line 24 isn't more than line 26a, skip lines 26d and 26e	26c				
c	Additional depreciation after 1969 and before 1976	26d				
	Enter the <b>smaller</b> of line 26c or 26d	26e				
	Section 291 amount (corporations only)	26f				
27	Add lines 26b, 26e, and 26f If section 1252 property: Skip this section if you didn't	26g				
	a partnership. Soil, water, and land clearing expenses	27a				
	Line 27a multiplied by applicable percentage	27b				
	Enter the <b>smaller</b> of line 24 or 27b	27c				
28	If section 1254 property: Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	27C				
k	Enter the <b>smaller</b> of line 24 or 28a	28b				
e	If section 1255 property: Applicable percentage of payments excluded from income under section 126. See instructions	29a				
k	Enter the smaller of line 24 or 29a. See instructions	29b				

# Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30.

30	Total gains for all properties. Add property columns A through D, line 24	30	
31	Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13	31	
32	Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion		
	from other than casualty or theft on Form 4797, line 6	32	
P	art IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to	50%	or Less

(see instructions)	
--------------------	--

			(a) Section 179	(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allowable in prior years	33		
34	Recomputed depreciation. See instructions	34		
35	Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	35		
1180	12 12-17-21			Form <b>4797</b> (2021)

16371103 149058 PACKARD

Form <b>3800</b>
Department of the Treasury Internal Revenue Service (99)
Name(s) shown on return

# **General Business Credit**

► 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.

Sequence Identifying number

OMB No. 1545-0895

22

			5
	E DAVID AND LUCILE PACKARD FOUNDATION		94-2278431
Pa	<b>Int I</b> Current Year Credit for Credits Not Allowed Against Tentative Minimum Tax (TMT)		
	(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	
2	Passive activity credits from line 2 of all Parts III with box B checked 2		
3	Enter the applicable passive activity credits allowed for 2021. See instructions	3	
4	Carryforward of general business credit to 2021. Enter the amount from line 2 of Part III with box C	_	27
	checked. See instructions for statement to attach	4	27.
_	Check this box if the carryforward was changed or revised from the original reported amount		▶∟
5	Carryback of general business credit from 2022. Enter the amount from line 2 of Part III with box D	_	
	checked	5	27.
	Add lines 1, 3, 4, and 5           Int II         Allowable Credit	6	21.
7	5		
	• Individuals. Enter the sum of the amounts from Form 1040, 1040-SR, or 1040-NR,		
	line 16, and Schedule 2 (Form 1040), line 2		
	• Corporations. Enter the amount from Form 1120, Schedule J, Part I, line 2; or the	_	17,771,587.
	applicable line of your return	7	17,771,507.
	• Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G,		
	lines 1a and 1b, plus any Form 8978 amount included on line 1d; or the amount from		
•	the applicable line of your return		
8	Alternative minimum tax:		
	Individuals. Enter the amount from Form 6251, line 11		0.
	Corporations. Enter -0-	8	0.
	• Estates and trusts. Enter the amount from Schedule I (Form 1041), line 54 )		
•	Add lines 7 and 0	9	17,771,587.
9	Add lines 7 and 8	9	17,771,507.
10.	Foreign tay predit		
	Foreign tax credit     10a       O Certain allowable credits (see instructions)     10b		
		100	
C	Add lines 10a and 10b	10c	
44	Net income tax. Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on line 16	11	17,771,587.
	net income tax. Subtract line foc from line 9. If zero, skip lines 12 through 15 and enter -0- of line 16	- 11	11,111,501.
12	Net regular tax. Subtract line 10c from line 7. If zero or less, enter -0-		
12		•	
13	Enter 25% (0.25) of the excess, if any, of line 12 over \$25,000. See		
10	instructions 13 4,436,647.		
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 52		
15	Enter the greater of line 13 or line 14	15	4,436,647.
16	Subtract line 15 from line 11. If zero or less, enter -0-	16	13,334,940.
17	Enter the <b>smaller</b> of line 6 or line 16	17	27.
	<b>C corporations:</b> See the line 17 instructions if there has been an ownership change, acquisition, or		
	reorganization.		
LHA	Solution Act Notice, see separate instructions.		Form <b>3800</b> (2021)

114401 11-30-21

	n 3800 (2021)		Page <b>2</b>
	<b>art II</b> Allowable Credit (continued) e: If you are not required to report any amounts on line 22 or 24 below, skip lines 18 through 25 and enter -0- on line 2	26	
NO	e. If you are not required to report any amounts on line 22 of 24 below, skip lines to through 25 and enter -0- on line 2	<u>.</u> 0.	
18	Multiply line 14 by 75% (0.75). See instructions	18	
19	Enter the greater of line 13 or line 18	19	
20	Subtract line 19 from line 11. If zero or less, enter -0-	20	
21	Subtract line 17 from line 20. If zero or less, enter -0-	21	
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 2021. See instructions	24	
25 26	Add lines 22 and 24 Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21	25	
20	or line 25	26	0.
27	Subtract line 13 from line 11. If zero or less, enter -0-	27	13,334,940.
28	Add lines 17 and 26	28	27.
29	Subtract line 28 from line 27. If zero or less, enter -0-	29	13,334,913.
30	Enter the general business credit from line 5 of all Parts III with box A checked	30	181,637.
31	Reserved	31	
32	Passive activity credits from line 5 of all Parts III with box B checked 32		
33	Enter the applicable passive activity credits allowed for 2021. See instructions	33	
34	Carryforward of business credit to 2021. 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 Check this box if the carryforward was changed or revised from the original reported amount	34	<u>968,899.</u> ►□
35	Carryback of business credit from 2022. 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	1,150,536.
37	Enter the <b>smaller</b> of line 29 or line 36	37	1,150,536.
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 6 • Corporations. Form 1120, Schedule J, Part I, line 5c • Estates and trusts. Form 1041, Schedule G, line 2b	38	1,150,563.

Form **3800** (2021)

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-	3800 (2021)			Page <b>3</b>
Name(	) shown on return			Identifying number
_	DAVID AND LUCILE PACKARD FOUNDATION	-		94-2278431
	t III General Business Credits or Eligible Small Business Credit	<b>ts</b> (see	e instructions)	
Com	blete a separate Part III for each box checked below. See instructions.			
Α	General Business Credit From a Non-Passive Activity			
В	General Business Credit From a Passive Activity F			
С			Business Credit Carryfor	wards
D	General Business Credit Carrybacks H Reser			
	If you are filing more than one Part III with box A or B checked, complete and attach f			•
	Parts III with box A or B checked. Check here if this is the consolidated Part III (a) Description of credit			
	: On any line where the credit is from more than one source, a separate Part III is need the pass-through entity.	ded	<b>(b)</b> Enter EIN if claiming the credit from a pass-through entity.	(c) Enter the appropriate amount.
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
b	Reserved	1b		
с	Increasing research activities (Form 6765)	1c		
d	Low-income housing (carryforward only) (see instructions)	1d		
е	Disabled access (Form 8826)*	1e		
f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f		
g	Indian employment (Form 8845)	1g		
h	Orphan drug (Form 8820)	1h		
i	New markets (Form 8874)	1i		
j	Small employer pension plan startup costs and auto-enrollment (Form 8881)	- 1j		
k	Employer-provided child care facilities and services (Form 8882)*	1k		
Т	Biodiesel and renewable diesel fuels (attach Form 8864)	11		
m	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	1n		
о	Nonconventional source fuel (carryforward only)	10		
р	Energy efficient home (Form 8908)	1p		
q	Energy efficient appliance (carryforward only)	1q		
r	Alternative motor vehicle (Form 8910)	1r		
s	Alternative fuel vehicle refueling property (Form 8911)	1s		
t	Enhanced oil recovery credit	1t		
u	Mine rescue team training (Form 8923)	1u		
v	Agricultural chemicals security (carryforward only)	1v		
w	Employer differential wage payments (Form 8932)	1w		
x	Carbon oxide sequestration (Form 8933)	1x		
у	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		
z	Qualified plug-in electric vehicle (carryforward only)	1z		
aa	Employee retention (Form 5884-A)	1aa		
bb	General credits from an electing large partnership (carryforward only)	1bb		
zz	Other. Oil and gas production from marginal wells (Form 8904) and certain other			
	credits (see instructions)	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	Work opportunity (Form 5884)	4b		16,312.
с	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586)	4d		193.
е	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee			
	tips (Form 8846)	4f		39,816.
g	Qualified railroad track maintenance (Form 8900)	4g		
h	Small employer health insurance premiums (Form 8941)	4h		
i	Increasing research activities (Form 6765)	4i		125,316.
j	Employer credit for paid family and medical leave (Form 8994)	4j		
z	Other	4z		
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		181,637.
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		181,637.
* See	instructions for limitation on this credit. 114403 11-30-21			Form <b>3800</b> (2021)

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Name(s	s) shown on return			Identifying number
_	E DAVID AND LUCILE PACKARD FOUNDATION			94-2278431
Par	t III General Business Credits or Eligible Small Business Credit	<b>S</b> (see	instructions)	
Com	olete a separate Part III for each box checked below. See instructions.			
<b>A</b>	X General Business Credit From a Non-Passive Activity E 📃 Reserv	ved		
в [	General Business Credit From a Passive Activity F 📃 Reserv	ved		
c	General Business Credit Carryforwards G Eligible	e Small	Business Credit Carryfor	wards
<b>D</b> [	General Business Credit Carrybacks H Reserv	ved		
I.	If you are filing more than one Part III with box A or B checked, complete and attach f	irst an a	additional Part III combinii	ng amounts from all
	Parts III with box A or B checked. Check here if this is the consolidated Part III			
Note	(a) Description of credit On any line where the credit is from more than one source, a separate Part III is need ach pass-through entity.	ded	<b>(b)</b> Enter EIN if claiming the credit from a pass-through entity.	(c) Enter the appropriate amount.
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
b	Reserved	1b		
c	Increasing research activities (Form 6765)	1c		
d	Low-income housing (carryforward only) (see instructions)	1d		
e	Disabled access (Form 8826)*	1e		
f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f	4	
g	Indian employment (Form 8845)	1g		
9 h	Orphan drug (Form 8820)	1h		
i	New markets (Form 8874)	1i		
i	Small employer pension plan startup costs and auto-enrollment (Form 8881)	- 1j		
, k	Employer-provided child care facilities and services (Form 8882)*	1k		
Ĩ	Biodiesel and renewable diesel fuels (attach Form 8864)	11		
m	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	1n		
0	Nonconventional source fuel (carryforward only)	10		
p	Energy efficient home (Form 8908)	1p		
q	Energy efficient appliance (carryforward only)	1q		
ч r	Alternative motor vehicle (Form 8910)	1r		
s	Alternative fuel vehicle refueling property (Form 8911)	1s		
ť	Enhanced oil recovery credit	1t		
u	Mine rescue team training (Form 8923)	1u		
v	Agricultural chemicals security (carryforward only)	1v		
w	Employer differential wage payments (Form 8932)	1w		
x	Carbon oxide sequestration (Form 8933)	1x		
ý	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		
z	Qualified plug-in electric vehicle (carryforward only)	1z		
- aa	Employee retention (Form 5884-A)	1aa		
bb	General credits from an electing large partnership (carryforward only)	1bb		
	Other. Oil and gas production from marginal wells (Form 8904) and certain other			
	credits (see instructions)	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	Work opportunity (Form 5884)	4b	27-5270108	2.
c	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586)	4d	04-3455023	89.
e	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee			
•	tips (Form 8846)	4f	04-3455023	66.
g	Qualified railroad track maintenance (Form 8900)	4g		
9 h	Small employer health insurance premiums (Form 8941)	- <del>-</del> 9 4h		
i	Increasing research activities (Form 6765)	4i	61-1830732	1,500.
j	Employer credit for paid family and medical leave (Form 8994)	4j		_,
J Z	Other	4z		<u> </u>
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		1,657.
6	Add lines 4a through 42 and enter here and on the applicable line of Part II	6		1,657.
	instructions for limitation on this credit			Eorm <b>3800</b> (2021)

See instructions for limitation on this credit.

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Name(	s) shown on return			Identifying number
_	E DAVID AND LUCILE PACKARD FOUNDATION			94-2278431
Pa	t III General Business Credits or Eligible Small Business Credit	t <b>s</b> (see	e instructions)	
Com	plete a separate Part III for each box checked below. See instructions.			
Α	General Business Credit From a Non-Passive Activity E	ved		
В	General Business Credit From a Passive Activity F	ved		
С	General Business Credit Carryforwards G Eligibl	e Small	Business Credit Carryfor	wards
D	General Business Credit Carrybacks H			
	If you are filing more than one Part III with box A or B checked, complete and attach f			•
	Parts III with box A or B checked. Check here if this is the consolidated Part III			
	(a) Description of credit : On any line where the credit is from more than one source, a separate Part III is need ach pass-through entity.	ded	<b>(b)</b> Enter EIN if claiming the credit from a pass-through entity.	(c) Enter the appropriate amount.
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
b	Reserved	1b		
с	Increasing research activities (Form 6765)	1c		
d	Low-income housing (carryforward only) (see instructions)	1d		
е	Disabled access (Form 8826)*	1e		
f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f		
g	Indian employment (Form 8845)	1g		
h	Orphan drug (Form 8820)	1h		
i	New markets (Form 8874)	<b>1</b> i		
j	Small employer pension plan startup costs and auto-enrollment (Form 8881)	1j		
k	Employer-provided child care facilities and services (Form 8882)*	1k		
Т	Biodiesel and renewable diesel fuels (attach Form 8864)	11		
m	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	1n		
0	Nonconventional source fuel (carryforward only)	10		
р	Energy efficient home (Form 8908)	1p		
q	Energy efficient appliance (carryforward only)	1q		
r	Alternative motor vehicle (Form 8910)	1r		
S	Alternative fuel vehicle refueling property (Form 8911)	1s		
t	Enhanced oil recovery credit	1t		
u	Mine rescue team training (Form 8923)	1u		
v	Agricultural chemicals security (carryforward only)	1v		
w	Employer differential wage payments (Form 8932)	1w		
x	Carbon oxide sequestration (Form 8933)	1x		
У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		
z	Qualified plug-in electric vehicle (carryforward only)	1z		
aa	Employee retention (Form 5884-A)	1aa		
bb	General credits from an electing large partnership (carryforward only)	1bb		
ZZ	Other. Oil and gas production from marginal wells (Form 8904) and certain other			
0	credits (see instructions)	1zz		
2 3	Add lines 1a through 1zz and enter here and on the applicable line of Part I Enter the amount from Form 8844 here and on the applicable line of Part II	2		
	Enter the amount from Form 8844 here and on the applicable line of Part II Investment (Form 3468, Part III) (attach Form 3468)	3 4a		
4a b		4a 4b	98-0546998	7,569.
c	Work opportunity (Form 5884) Biofuel producer (Form 6478)	40 4c	50 0540550	1,505.
d	Low-income housing (Form 8586)	4d	45-1564102	3.
e	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e	15 1501102	
f	Employer social security and Medicare taxes paid on certain employee			
•	tips (Form 8846)	4f	98-0546998	18,420.
g	Qualified railroad track maintenance (Form 8900)	41 4g	20 00 10000	
9 h	Small employer health insurance premiums (Form 8941)	4h		
i	Increasing research activities (Form 6765)	4i	82-2344815	83,728.
i	Employer credit for paid family and medical leave (Form 8994)	4j		
J Z	Other	4z		
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		109,720.
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		109,720.
	instructions for limitation on this credit. 114403 11-30-21			Form <b>3800</b> (2021)

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Name(s	s) shown on return			Identifying number
	DAVID AND LUCILE PACKARD FOUNDATION			94-2278431
Par	t III General Business Credits or Eligible Small Business Credit	S (see	instructions)	
Com	plete a separate Part III for each box checked below. See instructions.			
A	X General Business Credit From a Non-Passive Activity E 📃 Reserv	/ed		
В	General Business Credit From a Passive Activity F 📃 Reserv	/ed		
c	General Business Credit Carryforwards G 📃 Eligible	e Small	Business Credit Carryfor	wards
D	General Business Credit Carrybacks H	ved		
I.	If you are filing more than one Part III with box A or B checked, complete and attach fi	rst an a	additional Part III combinii	ng amounts from all
	Parts III with box A or B checked. Check here if this is the consolidated Part III			
	(a) Description of credit On any line where the credit is from more than one source, a separate Part III is need ach pass-through entity.	led	(b) Enter EIN if claiming the credit from a pass-through entity.	(c) Enter the appropriate amount.
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
b	Reserved	1b		
c	Increasing research activities (Form 6765)	1c		
d	Low-income housing (carryforward only) (see instructions)	1d		
e	Disabled access (Form 8826)*	1e		
f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f	4	
g	Indian employment (Form 8845)	1g		
h	Orphan drug (Form 8820)	1h		
i	New markets (Form 8874)	1i		
i	Small employer pension plan startup costs and auto-enrollment (Form 8881)	- 1j		
, k	Employer-provided child care facilities and services (Form 8882)*			
ĩ	Biodiesel and renewable diesel fuels (attach Form 8864)	11		
m	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	1n		
0	Nonconventional source fuel (carryforward only)	10		
p	Energy efficient home (Form 8908)	1p		
q	Energy efficient appliance (carryforward only)	1q		
ч r	Alternative motor vehicle (Form 8910)	1r		
s	Alternative fuel vehicle refueling property (Form 8911)	1s		
t	Enhanced oil recovery credit	1t		
u	Mine rescue team training (Form 8923)	1u		
v	Agricultural chemicals security (carryforward only)	1v		
w	Employer differential wage payments (Form 8932)	1w		
x	Carbon oxide sequestration (Form 8933)	1x		
	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		
у z	Qualified plug-in electric vehicle (carryforward only)	1z		
aa		1aa		
bb	Employee retention (Form 5884-A) General credits from an electing large partnership (carryforward only)	1bb		<u> </u>
zz	Other. Oil and gas production from marginal wells (Form 8904) and certain other			<u> </u>
~~	credits (see instructions)	1zz		
2		2		
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	3		
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a		
b	Work opportunity (Form 5884)	4b	98-0546998	8,741.
c	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586)	4d	36-4804829	101.
e	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee			†
•	tips (Form 8846)	4f	98-0546998	21,273.
n	Qualified railroad track maintenance (Form 8900)	4g		
g h	Small employer health insurance premiums (Form 8941)	4y 4h		-
i	Increasing research activities (Form 6765)	4i	46-5728474	1,647.
j	Employer credit for paid family and medical leave (Form 8994)	4j		
J Z	Other	4j 4z		1
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		31,762.
6	Add lines 4a through 42 and enter here and on the applicable line of Part II	6		31,762.
	instructions for limitation on this credit			Eorm <b>3800</b> (2021)

See instructions for limitation on this credit.

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Form	3800 (2021)			Page <b>3</b>
Name(s	) shown on return			Identifying number
_	DAVID AND LUCILE PACKARD FOUNDATION			94-2278431
Par	t III General Business Credits or Eligible Small Business Credit	S (see	instructions)	
Com	blete a separate Part III for each box checked below. See instructions.			
A	X         General Business Credit From a Non-Passive Activity         E         Reserve	ved		
B	General Business Credit From a Passive Activity <b>F</b>			
C		e Small	Business Credit Carryfor	wards
D	General Business Credit Carrybacks H L Reserv			
	f you are filing more than one Part III with box A or B checked, complete and attach f			
	Parts III with box A or B checked. Check here if this is the consolidated Part III (a) Description of credit			
Note	On any line where the credit is from more than one source, a separate Part III is need ch pass-through entity.	bed	<b>(b)</b> Enter EIN if claiming the credit from a pass-through entity.	(c) Enter the appropriate amount.
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a	nonra pass anough onaty.	
b	Reserved	1b		
c	Increasing research activities (Form 6765)	1c		
d	Low-income housing (carryforward only) (see instructions)	1d		
e	Disabled access (Form 8826)*	1e		
f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f		
g	Indian employment (Form 8845)	1g		
9 h	Orphan drug (Form 8820)	1h		
i	New markets (Form 8874)	1i		
i	Small employer pension plan startup costs and auto-enrollment (Form 8881)			
, k	Employer-provided child care facilities and services (Form 8882)*	1k		
1	Biodiesel and renewable diesel fuels (attach Form 8864)	11		
m	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	1n		
0	Nonconventional source fuel (carryforward only)	10		
p	Energy efficient home (Form 8908)	1p		
q	Energy efficient appliance (carryforward only)	1q		
r	Alternative motor vehicle (Form 8910)	1r		
s	Alternative fuel vehicle refueling property (Form 8911)	1s		
t	Enhanced oil recovery credit	1t		
u	Mine rescue team training (Form 8923)	1u		
v	Agricultural chemicals security (carryforward only)	1v		
w	Employer differential wage payments (Form 8932)	1w		
х	Carbon oxide sequestration (Form 8933)	1x		
у	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		
z	Qualified plug-in electric vehicle (carryforward only)	1z		
aa	Employee retention (Form 5884-A)	1aa		
bb	General credits from an electing large partnership (carryforward only)	1bb		
zz	Other. Oil and gas production from marginal wells (Form 8904) and certain other			
	credits (see instructions)	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	Work opportunity (Form 5884)	4b		
с	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586)	4d		
е	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee			
	tips (Form 8846)	4f	36-4804829	57.
g	Qualified railroad track maintenance (Form 8900)	4g		ļ
h	Small employer health insurance premiums (Form 8941)	4h	· · · · · · · · · · · · · · · · · · ·	
i	Increasing research activities (Form 6765)	4i	84-4550787	37,623.
j	Employer credit for paid family and medical leave (Form 8994)	4j		
z	Other	4z		
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		37,680.
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		37,680.
* See	instructions for limitation on this credit. 114403 11-30-21			Form <b>3800</b> (2021)

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	3800 (2021)			Page <b>3</b>
Name(s	) shown on return			Identifying number
_	DAVID AND LUCILE PACKARD FOUNDATION			94-2278431
Par	t III General Business Credits or Eligible Small Business Credit	S (see	instructions)	
Com	blete a separate Part III for each box checked below. See instructions.			
A	X     General Business Credit From a Non-Passive Activity     E			
B	General Business Credit From a Passive Activity F L Reserv			
C [	General Business Credit Carryforwards G Eligible	e Small	Business Credit Carryfor	wards
D	General Business Credit Carrybacks H Reserv			
	f you are filing more than one Part III with box A or B checked, complete and attach fi			
	Parts III with box A or B checked. Check here if this is the consolidated Part III (a) Description of credit			
Note	On any line where the credit is from more than one source, a separate Part III is need	led	<b>(b)</b> Enter EIN if claiming the credit from a pass-through entity.	(c)
	ch pass-through entity.	Ι.	from a pass-through entity.	Enter the appropriate amount.
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
b	Reserved	1b		
C	Increasing research activities (Form 6765)	1c		
d	Low-income housing (carryforward only) (see instructions)	1d		
е	Disabled access (Form 8826)*	1e		
f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f		
g	Indian employment (Form 8845)	1g		
h	Orphan drug (Form 8820)	1h		
i	New markets (Form 8874)	1i		
1	Small employer pension plan startup costs and auto-enrollment (Form 8881)	<u>1j</u>		
k	Employer-provided child care facilities and services (Form 8882)*	1k		
I	Biodiesel and renewable diesel fuels (attach Form 8864)	11		
m	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	<u>1n</u>		
0	Nonconventional source fuel (carryforward only)	10		
р	Energy efficient home (Form 8908)	<b>1</b> p		
q	Energy efficient appliance (carryforward only)	1q		
r	Alternative motor vehicle (Form 8910)	1r		
s	Alternative fuel vehicle refueling property (Form 8911)	1s		
t	Enhanced oil recovery credit	1t		
u	Mine rescue team training (Form 8923)	1u		
v	Agricultural chemicals security (carryforward only)	1v		
w	Employer differential wage payments (Form 8932)	1w		
x	Carbon oxide sequestration (Form 8933)	1x		
У	Qualified plug-in electric drive motor vehicle (Form 8936)	<b>1</b> y		
z	Qualified plug-in electric vehicle (carryforward only)	1z		
aa	Employee retention (Form 5884-A)	1aa		
bb	General credits from an electing large partnership (carryforward only)	1bb		
ZZ	Other. Oil and gas production from marginal wells (Form 8904) and certain other			
	credits (see instructions)	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	Work opportunity (Form 5884)	4b		
с	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586)	4d		
e	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee			
	tips (Form 8846)	4f		
g	Qualified railroad track maintenance (Form 8900)	4g		
h	Small employer health insurance premiums (Form 8941)	4h	84-2134622	818.
i	Increasing research activities (Form 6765)	4i	04-2134022	010.
j	Employer credit for paid family and medical leave (Form 8994)	4j		+
z	Other	4z		818.
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		818.
<u>6</u>	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		Eorm <b>3900</b> (2021)

\* See instructions for limitation on this credit.

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	3800 (2021)			Page <b>3</b>
Name(s	) shown on return			Identifying number
	DAVID AND LUCILE PACKARD FOUNDATION			94-2278431
	t III General Business Credits or Eligible Small Business Credit	S (see	e instructions)	
Com	blete a separate Part III for each box checked below. See instructions.			
A	General Business Credit From a Non-Passive Activity			
B	General Business Credit From a Passive Activity F Reserv			
C			Business Credit Carryfor	wards
D	General Business Credit Carrybacks H			
	If you are filing more than one Part III with box A or B checked, complete and attach f			°
	Parts III with box A or B checked. Check here if this is the consolidated Part III (a) Description of credit		(b)	
	: On any line where the credit is from more than one source, a separate Part III is need the pass-through entity.	ded	(D) Enter EIN if claiming the credit from a pass-through entity.	(c) Enter the appropriate amount.
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
b	Reserved	1b		
с	Increasing research activities (Form 6765)	1c		
d	Low-income housing (carryforward only) (see instructions)	1d		27.
е	Disabled access (Form 8826)*	1e		
f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f		
g	Indian employment (Form 8845)	1g		
h	Orphan drug (Form 8820)	1h		
i	New markets (Form 8874)	1i		
j	Small employer pension plan startup costs and auto-enrollment (Form 8881)	1j		
k	Employer-provided child care facilities and services (Form 8882)*	1k		
Т	Biodiesel and renewable diesel fuels (attach Form 8864)	11		
m	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	1n		
о	Nonconventional source fuel (carryforward only)	10		
р	Energy efficient home (Form 8908)	1p		
q	Energy efficient appliance (carryforward only)	1q		
r	Alternative motor vehicle (Form 8910)	1r		
s	Alternative fuel vehicle refueling property (Form 8911)	1s		
t	Enhanced oil recovery credit	1t		
u	Mine rescue team training (Form 8923)	1u		
v	Agricultural chemicals security (carryforward only)	1v		
w	Employer differential wage payments (Form 8932)	1w		
х	Carbon oxide sequestration (Form 8933)	1x		
У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		
z	Qualified plug-in electric vehicle (carryforward only)	1z		
aa	Employee retention (Form 5884-A)	1aa		
bb	General credits from an electing large partnership (carryforward only)	1bb		
zz	Other. Oil and gas production from marginal wells (Form 8904) and certain other			
	credits (see instructions)	1zz		
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		27.
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	Work opportunity (Form 5884)	4b		
с	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586)	4d		726.
е	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee			
	tips (Form 8846)	4f		663,121.
g	Qualified railroad track maintenance (Form 8900)	4g		
h	Small employer health insurance premiums (Form 8941)	4h		
i	Increasing research activities (Form 6765)	4i		305,052.
j	Employer credit for paid family and medical leave (Form 8994)	4j		ļ
z	Other	4z		
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		968,899.
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		968,926.
* See	instructions for limitation on this credit. 114403 11-30-21			Form <b>3800</b> (2021)

114403 11-30-21

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Form **3800** (2021)

Form	2220
Depart	ment of the Treasury

Internal Revenue Service

#### Name

# **Underpayment of Estimated Tax by Corporations**

FORM 990-T

Attach to the corporation's tax return.
 FORM
 Go to www.irs.gov/Form2220 for instructions and the latest information.

Employer identification number

$\mathbf{THE}$	DAVID	AND	LUCILE	PACKARD	FOUNDATION	

94-2278431

OMB No. 1545-0123

2021

**Note:** Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

Part I Required Annual Payment			
1 Total tax (see instructions)		1	16,620,934.
<b>2 a</b> Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	2a		
<b>b</b> Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method	2b		
c Credit for federal tax paid on fuels (see instructions)	20	2d	
<ul> <li>d Total. Add lines 2a through 2c</li> <li>3 Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corp does not owe the penalty</li> </ul>		16,620,934.	
4 Enter the tax shown on the corporation's 2020 income tax return. See instructions. <b>Caution:</b> If the tax or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5	< is zero	4	
5 Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip enter the amount from line 3		5	16,620,934.
Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, i even if it does not owe a penalty. See instructions.			, ,

6		The corporation is using the adjusted seasonal installment method.
---	--	--

7 X The corporation is using the annualized income installment method.

8 X The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

Part III Figuring the Underpayment

-			(a)		(b)	(C)	(d)				
9	Installment due dates. Enter in columns (a) through (d) the										
	15th day of the 4th (Form 990-PF filers: Use 5th month),										
	6th, 9th, and 12th months of the corporation's tax year	9	05/15/21	-	06/15/21	09/15/21	12/15/21				
10	Required installments. If the box on line 6 and/or line 7										
	above is checked, enter the amounts from Sch A, line 38. If										
	the box on line 8 (but not 6 or 7) is checked, see instructions										
	for the amounts to enter. If none of these boxes are checked,										
	enter 25% (0.25) of line 5 above in each column	10									
11	Estimated tax paid or credited for each period. For										
	column (a) only, enter the amount from line 11 on line 15.										
	See instructions	11	8,427,569	).							
	Complete lines 12 through 18 of one column										
	before going to the next column.										
12	Enter amount, if any, from line 18 of the preceding column	12					8,427,569.				
13	Add lines 11 and 12	13			8,427,569.	8,427,569.	8,427,569.				
14	Add amounts on lines 16 and 17 of the preceding column	14									
15	Subtract line 14 from line 13. If zero or less, enter -0-	15	8,427,569	).	8,427,569.	8,427,569.	8,427,569.				
16	If the amount on line 15 is zero, subtract line 13 from line										
	14. Otherwise, enter -0-	16									
17	Underpayment. If line 15 is less than or equal to line 10,										
	subtract line 15 from line 10. Then go to line 12 of the next										
	column. Otherwise, go to line 18	17									
18	<b>Overpayment.</b> If line 10 is less than line 15, subtract line 10										
	from line 15. Then go to line 12 of the next column										
Go	o to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.										

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 2220 (2021)

112801 01-06-22

#### FORM 990-T

Form 2220 (2021)

#### Part IV Figuring the Penalty

			(a)	(b)	(C)		(d)	
19	Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month							
	instead of 4th month.) See instructions	19						
20	Number of days from due date of installment on line 9 to the							
	date shown on line 19	20						
21	Number of days on line 20 after 4/15/2021 and before 7/1/2021	21						
22	Underpayment on line 17 x Number of days on line 21 x 3% (0.03) 365	22	\$	\$	\$		\$	
23	Number of days on line 20 after 6/30/2021 and before 10/1/2021	23						
24	Underpayment on line 17 x Number of days on line 23 x 3% (0.03) 365	24	\$	\$	\$		\$	
25	Number of days on line 20 after 9/30/2021 and before 1/1/2022	25						
26	Underpayment on line 17 x Number of days on line 25 x 3% (0.03) 365	26	\$	\$	\$		\$	
27	Number of days on line 20 after 12/31/2021 and before 4/1/2022	27						
28	Underpayment on line 17 x Number of days on line 27 x 3% (0.03) 365	28	\$	\$	\$		\$	
29	Number of days on line 20 after 3/31/2022 and before 7/1/2022	29						
80	Underpayment on line 17 x Number of days on line 29 x *%	30	\$	\$	\$		\$	
1	Number of days on line 20 after 6/30/2022 and before 10/1/2022	31						
2	Underpayment on line 17 x Number of days on line 31 x *%	32	\$	\$	\$		\$	
3	Number of days on line 20 after 9/30/2022 and before 1/1/2023	33						
4	Underpayment on line 17 x Number of days on line 33 x *%	34	\$	\$	\$		\$	
5	Number of days on line 20 after 12/31/2022 and before 3/16/2023	35						
86	Underpayment on line 17 x Number of days on line 35 x *%	36	\$	\$	\$		\$	
37	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$		\$	
8	Penalty. Add columns (a) through (d) of line 37. Enter the to	tal he	ere and on Form 1120, lin	e 34; or the comparable				-
	line for other income tax returns					38	\$	0

These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at **www.irs.gov**. You can also call 1-800-829-4933 to get interest rate information.

Form **2220** (2021)

112802 01-06-22

#### THE DAVID AND LUCILE PACKARD FOUNDATION

Form 2220 (2021)

FORM 990-T

Page 3

#### Schedule A Adjusted Seasonal Installment Method and Annualized Income Installment Method

See instructions.

Form 1120-S filers: For lines 1, 2, 3, and 21, "taxable income" refers to excess net passive income or the amount on which tax is imposed under section 1374(a), whichever applies.

#### Part I Adjusted Seasonal Installment Method

**Caution:** Use this method only if the base period percentage for any 6 consecutive months is at least 70%. See instructions.

1 Enter taxable income for the following periods. a Tax year beginning in 2018 b Tax year beginning in 2019First 3 monthsFirst 5 monthsFirst 8 monthsFirst 11 mo1a1a1a1a1a1a1a1a	nths
b Tax year beginning in 2019 1b	
c Tax year beginning in 2020 1c	
2 Enter taxable income for each period for the tax year beginning in	
2021. See the instructions for the treatment of extraordinary items 2	
First 4 months First 6 months First 9 months Entire ye	r
3 Enter taxable income for the following periods.	.1
a Tax year beginning in 2018 3a	
b Tax year beginning in 2019 3b	
c Tax year beginning in 2020 3c	
4 Divide the amount in each column on line 1a by the	
amount in column (d) on line 3a 4	
5 Divide the amount in each column on line 1b by the	
amount in column (d) on line 3b 5	
6 Divide the amount in each column on line 1c by the amount in column (d) on line 3c 6	
amount in column (d) on line 3c 6	
7 Add lines 4 through 6	
8 Divide line 7 by 3.0	
9a Divide line 2 by line 8         9a	
b Extraordinary items (see instructions)	
c Add lines 9a and 9b	
10 Figure the tax on the amt on In 9c using the instr for Form	
1120, Sch J, line 2, or comparable line of corp's return 10	
11a Divide the amount in columns (a) through (c) on line 3a	
by the amount in column (d) on line 3a 11a	
b Divide the amount in columns (a) through (c) on line 3b	
by the amount in column (d) on line 3b 11b	
<b>c</b> Divide the amount in columns (a) through (c) on line 3c	
by the amount in column (d) on line 3c 11c	
12         Add lines 11a through 11c         12	
13 Divide line 12 by 3.0         13	
14 Multiply the amount in columns (a) through (c) of line 10	
by columns (a) through (c) of line 13. In column (d), enter	
the amount from line 10, column (d) 14	
15 Enter any alternative minimum tax (trusts only) for each	
payment period. See instructions 15	
16   Enter any other taxes for each payment period. See instr.   16     17   Add lines 14 through 10   17	
17     Add lines 14 through 16       18     For each paried anter the same time of gradity as allowed	
18 For each period, enter the same type of credits as allowed	
on Form 2220, lines 1 and 2c. See instructions 18	
zero or less, enter -0	

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112821 01-06-22

Form 2220 (2021)

# Part II Annualized Income Installment Method

		(a)	(b)	(C)	(d)
		First 2	First 3	First 6	First 9
<b>0</b> Annualization periods (see instructions)	20	months	months	months	months
1 Enter taxable income for each annualization period. See					
instructions for the treatment of extraordinary items $\ldots$	21				
<b>2</b> Annualization amounts (see instructions)	22	6.000000	4.000000	2.000000	1.33333
23a Annualized taxable income. Multiply line 21 by line 22	23a				
<b>b</b> Extraordinary items (see instructions)	23b				
c Add lines 23a and 23b	23c				
<b>24</b> Figure the tax on the amount on line 23c using the					
instructions for Form 1120, Schedule J, line 2,					
or comparable line of corporation's return	24				
25 Enter any alternative minimum tax (trusts only) for each					
payment period (see instructions)	25				
6 Enter any other taxes for each payment period. See instr.	26				
7 Total tax. Add lines 24 through 26	27				
<ul> <li>7 Total tax. Add lines 24 through 26</li> <li>8 For each period, enter the same type of credits as allowed</li> </ul>					
on Form 2220, lines 1 and 2c. See instructions	28				
<b>19</b> Total tax after credits. Subtract line 28 from line 27. If	20				
	29				
zero or less, enter -0-	29				
0 Applicable percentage	30	25%	50%	75%	100%
81 Multiply line 29 by line 30	31				
Part III Required Installments				I I	
				Г Г Г	
Note: Complete lines 32 through 38 of one column		1st	2nd	3rd	4th
before completing the next column.		installment	installment	installment	installment
32 If only Part I or Part II is completed, enter the amount in					
each column from line 19 or line 31. If both parts are					
completed, enter the <b>smaller</b> of the amounts in each			•	0	0
column from line 19 or line 31	32	0.	0.	0.	0
33 Add the amounts in all preceding columns of line 38.					
See instructions	33				
34 Adjusted seasonal or annualized income installments.					
Subtract line 33 from line 32. If zero or less, enter -0-	34				
5 Enter 25% (0.25) of line 5 on page 1 of Form 2220 in					
each column. Note: "Large corporations," see the		4 155 004	4 1 5 5 0 2 2	4 155 004	4 1 5 5 0 2 2
instructions for line 10 for the amounts to enter	35	4,155,234.	4,155,233.	4,155,234.	4,155,233
6 Subtract line 38 of the preceding column from line 37 of the preceding column	36		4.155.234.	8,310,467.	12.465.701
7 Add lines 35 and 36	37	4,155,234.	8,310,467.	12,465,701.	16,620,934
<b>Required installments.</b> Enter the <b>smaller</b> of line 34 or					
line 37 here and on page 1 of Form 2220, line 10.		_		_	
See instructions	38	0.	0.	0.	0.

\*\* ANNUALIZED INCOME INSTALLMENT METHOD USING STANDARD OPTION

112822 01-06-22

Form <b>8990</b>
(Rev. May 2020)
Department of the Treasury

# Limitation on Business Interest Expense Under Section 163(j)

OMB No. 1545-0123

Attach to your tax return.

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

#### Taxpayer name(s) shown on tax return THE DAVID AND LUCILE PACKARD FOUNDATION

Identification number 94-2278431

If Form 8990 relates to an information return for a foreign entity (for example, Form 5471), enter:

Name of foreign entity

Employer identification number, if any

#### Reference ID number Part I 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 taxpayer is a partner or shareholder of a pass-through entity subject to section 163(j).

#### Section I - Business Interest Expense

1	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				
3	Partner's excess business interest expense treated as paid or					
	accrued in current year (Schedule A, line 44, column (h))	3		29,680.		
4	Floor plan financing interest expense. See instructions	4				
5	Total business interest expense. Add lines 1 through 4			►	5	29,680.

#### Section II - Adjusted Taxable Income

6

#### **Taxable Income**

#### 6 104,833,053. Taxable income. See instructions

#### Additions (adjustments to be made if amounts are taken into account on line 6)

7	Any item of loss or deduction that 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				
	instructions	8			
9	Amount of any net operating loss deduction under section 172	9			
10	Amount of any qualified business income deduction allowed under				
	section 199A	10			
11	Deduction allowable for depreciation, amortization, or depletion attributable				
	to a trade or business. See instructions	11			
12	Amount of any loss or deduction items from a pass-through entity.				
	See instructions	12	41,914,858.		
13	Other additions. See instructions	13			
14	Total current year partner's excess taxable income (Schedule A, line				
	44, column (f))	14			
15	Total current year S corporation shareholder's excess taxable				
	income (Schedule B, line 46, column (c))	15			
16	Total. Add lines 7 through 15		►	16	41,914,858.

#### Reductions (adjustments to be made if amounts are taken into account on line 6)

17	Any item of income or gain that is not properly allocable to a trade				
	or business of the taxpayer. See instructions	17	(		
18	Any business interest income not from a pass-through entity. See instructions	18	( )		
19	Amount of any income or gain items from a pass-through entity.				
	See instructions	19	(146,747,911.)		
20	Other reductions. See instructions	20	( )		
21	Total. Combine lines 17 through 20	21	(146,747,911.)		
22	Adjusted taxable income. Combine lines 6, 16, and 21. (If zero or less, enter -0	22			
	For Dapprwork Poduction Act Nation, son the instructions				Form 8990 (Poy 5 2020)

LHA For Paperwork Reduction Act Notice, see the instructions.

Form **6990** (Rev. 5-2020)

123211 04-01-21

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	3990 (Rev. 5-2020)				Page
Secti	ion III - Business Interest Income				
23	Current year business interest income. See instructions	23			
24	Excess business interest income from pass through entities (total of				
	Schedule A, line 44, column (g), and Schedule B, line 46, column (d))	24	29,680.		
25	Total. Add lines 23 and 24		►	25	29,680
Secti	ion IV - Section 163(j) Limitation Calculations				
	Limitation on Business Intere	est Expense			
26	Multiply adjusted taxable income (line 22) by the applicable percentage. See				
07		26 27	29,680.	-	
27 28	Business interest income (line 25)	28	29,000.	-	
20 29	Floor plan financing interest expense (line 4)		<b>•</b>	29	29,680
29	Allowable Business Interes			25	
30	Total current year business interest expense deduction. See instructions .	-		30	29,680
00	Carryforward			00	
31	Disallowed business interest expense. Subtract line 29 from line 5. (If zero of	orloss optor (		31	1
Part		<u>or less, enter</u> -c	)	51	<u> </u>
	I is only completed by a partnership that is subject to section 163(j). The partners re not carried forward by the partnership. See the instructions for more informatic		w are allocated to t	he pari	tners
anu a	Excess Business Interest				
20		-		32	1
32	Excess business interest expense. Enter amount from line 31	unt on line 20			27)
				T -	1
33	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)	· · · · · · · · · · · · · · · · · · ·		33	
34	Subtract line 33 from line 26. (If zero or less, enter -0)			34	
35 26	Divide line 34 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -			35 36	
36	Excess taxable income. Multiply line 35 by line 22 Excess Business Interest			30	<u> </u>
				T	1
37	Excess business interest income. Subtract the sum of lines 1, 2, and 3 from			07	
Part	Elli S Corporation Pass-Through Items			37	
	Il is only completed by S corporations that are subject to section 163(j). The S con the instructions for more information.	rporation items	s below are allocate	ed to th	ne shareholders.
000 11	Excess Taxable Inco	ome			
38	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)			38	
39	Subtract line 38 from line 26. (If zero or less, enter -0)			39	1
40	Divide line 39 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -			40	
41	Excess taxable income. Multiply line 40 by line 22			41	
	Excess Business Interest				
42	Excess business interest income. Subtract the sum of lines 1, 2, and 3 from	i line 25. (If zer	o or		
42	<b>Excess business interest income.</b> Subtract the sum of lines 1, 2, and 3 from less, enter -0)	·		42	

#### Form 8990 (Rev. 5-2020) SCHEDULE A Summary of Partner's Section 163(j) Excess Items

		Excess Business Interest Expense			(f) Current year	(g) Current year	(h) Excess business	(i) Current year	
(a) Name of partnership	<b>(b)</b> EIN	<b>(c)</b> Current year	(d) Prior(e) Totalyear carryforward((c) plus (d))		excess taxable income	excess business interest income	interest expense treated as paid or accrued (see instructions)	excess business inter expense carryforwar ((e) minus (h))	
FROM PARTNERSHIP									
43	94-2278431	105,371.	302,601.	407,972.	0.	29,680.	29,680.	378,292	
					0.	29,680.	29,680.		
CHEDULE B Summary of S	S Corporation Sh	areholder's Ex	cess Taxable In	come and Exce	ss Business Int	erest Income			
	S Corporation Sh te Part I and is a share				ss Business Int	erest Income			

	(a) Name of S corporation	(b) EIN	(c) Current year excess taxable income	(d) Current year excess business interest income
45				
46	Total		0.	0.

Form 8990 (Rev. 5-2020)

**Business Interest Expense** THE DAVID AND LUCILE PACKARD FOUNDATION 94-2278431 Prior Disallowed Business Interest Expense Disallowed Business Interest Expense Business Interest Expense Business Interest Expense Ratio Limited Business Interest Expense Description THE DAVID AND LUCILE PACKARD FOUNDATION - PARTNERSHIP INTEREST EXP Ο. FROM PARTNERSHIP 29,680. 1.0000 29,680. 0 29,680. 1.0000 29,680. Ο. Total

Form <b>8978</b>							
(December 2019)							
Department of the Treasury Internal Revenue Service							
Name of partner(s)							

# Partner's Additional Reporting Year Tax

OMB No. 1545-0123

► Go to www.irs.gov/Form8978 for instructions and the latest information.

Attachment Sequence No. **57** 

Name o	of partner(s)				Partner tax ID numbe	er
	DAVID AND LUCILE PACKARD FOUNDATIO				94-2278431	
Part	Computation of Additional Reporting	Year	Tax (see instruc	tions)		
			<b>(a)</b> Tax Year Ended	<b>(b)</b> Tax Year Ended	<b>(c)</b> Tax Year Ended	<b>(d)</b> Tax Year Ended
			12/31 2018	12/31 2018	12/31 2019	20
1a	Total income per original return or as previously adjusted	1a	(16,214,123	(16,214,123)	(4,099,193)	
b	Adjustments to income from Schedule A (Form 8978), line 2, columns (a) through (d)	1b	17,552	2,031	3,465	
2	Combine lines 1a and 1b and enter the corrected income. See instructions	2	(16,196,571	(16,212,092)		)
3a	Total deductions per original return or as previously adjusted	3a	519,752	519,752	549 <b>,</b> 231	
b	Adjustments to deductions from Schedule A (Form 8978), line 4, columns (a) through (d) .	3b	32,461			
4	Combine lines 3a and 3b and enter the corrected deductions. See instructions	4	552,213			
5	Corrected taxable income. Subtract line 4 from line 2	5			(4,688,865)	
6	Income tax on line 5 (see instructions)	6	0	0	0	
7	Alternative minimum tax on line 5 (see instructions)	7				
8	Total corrected income tax. Add lines 6 and 7.	8	0	0	0	
9a	Total credits per original return or as previously adjusted	9a			0	
b	Adjustments to credits from Schedule A (Form 8978), line 6, columns (a) through (d)	9b	57	14	19	
10	Combine lines 9a and 9b and enter the corrected credits. See instructions	10	57	14	19	
11	Total corrected income tax liability. Subtract line10 from line 8	11	(57	) (14)	(19)	)
12	Total income tax shown on original return or as previously adjusted	12				
13	Increase/Decrease to tax. Subtract line 12 from line 11, columns (a) through (d)	13	(57	) (14)	(19)	)
14			13, columns (a) th	0 ()		(90
Part	I Penalties (see instructions)	1	1	1		
15	Penalties	15				
16	Total penalties. Add line 15, columns (a) through (a)	d).	<u></u>	<u></u>	16	0
Part	Interest (see instructions)	1	1	1		
17	Interest	17				
18	Total interest. Add line 17, columns (a) through (d)	•	<u></u>	<u></u>	18	0
For Pa	perwork Reduction Act Notice, see separate instruction	ons.			I	Form <b>8978</b> (12-2019)

SCHEDULE A (Form 8978)

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(December 2019) Department of the Treasury Internal Revenue Service

# Partner's Additional Reporting Year Tax (Schedule of Adjustments)

OMB No. 1545-0123

► Attach to Form 8978.

► Go to www.irs.gov/Form8978 for the latest information.

Name o	of partner(s)				Partner tax ID numbe	er
THE	DAVID AND LUCILE I	PACKARD FOUNDATION		94-2278431		
	Adjustments (see instructions)	Tracking Number	<b>(a)</b> Tax Year Ended 12/31//18	<b>(b)</b> Tax Year Ended 12/31 /18	<b>(c)</b> Tax Year Ended 12/31/19	<b>(d)</b> Tax Year Ended /20
1	Income:					
а	ORD. BUS. INC.	AAR, 46-5728474	15 <b>,</b> 829	1,740	17,060	
b	INTEREST INC.	AAR, 46-5728474	1,723	291	(13,002)	
с	NET LT CAP GAIN	AAR, 46-5728474			(593)	
d						
е						
f				_		
g						
2		ome (add lines 1a through 1g gh (d))	17,552	2,031	3,465	
3	Deductions:					
а	CASH CONTRIB	AAR, 46-5728474	1	0	0	
b	INV. INT. EXP	AAR, 46-5728474	31,742	7,514	38,527	
с	DED. PORTFOLIO	AAR, 46-5728474	718	170	4,558	
d	OTHER DEDUCTIONS	AAR, 46-5728474			821	
е						
f						
g						
4		uctions (add lines 3a through ough (d))	32 <b>,</b> 461	7,684	43,906	
5 a	Credits: RESEARCH ACT	AAR, 46-5728474	61	10	19	
b	POST 1986 DEPR.	AAR, 46-5728474	(4)	4	0	
с						
d						
е						
f						
g						
6	Total adjustments to cre	dits (add lines 5a through 5g				
		gh (d))	57	14	19	

For Paperwork Reduction Act Notice, see the Instructions for Form 1065.

Schedule A (Form 8978) (12-2019)

(Rev. January 2022)

# Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

#### File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits*.

#### Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Туре о	r Name of exempt organization or other filer, see instru	Taxpayer	Taxpayer identification number (TIN)						
print	THE DAVID AND LUCILE PACKAR		94-2278431						
filing your	ue date for Number, street, and room or suite no. If a P.O. box, see instructions.								
return. See instructions.       O I O D D D D D D D D D D D D D D D D D									
Enter t	ne Return Code for the return that this application is for (file	e a separa	te application for each return)						
Applica	ation	Return	Application		Retu				
ls For		Code	Is For			Code			
Form 9	90 or Form 990-EZ	01	Form 1041-A			08			
Form 4	720 (individual)	03	Form 4720 (other than individual)			09			
Form 9	90-PF	04	Form 5227			10			
Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11			
Form 9	90-T (trust other than above)	06	Form 8870			12			
Form 9	90-T (corporation) CRAIG NEYMAN, (	07							
<ul> <li>If th</li> <li>If th</li> <li>box </li> <li>1</li> <li>1</li> <li>t</li> <li>t</li> <li>2</li> <li>1</li> </ul>	request an automatic 6-month extension of time until he organization named above. The extension is for the org ► X calendar year 2021 or ► tax year beginning the tax year entered in line 1 is for less than 12 months, c Change in accounting period	Group Exe and atta NOVEI anization's , an heck reaso	mption Number (GEN), I ach a list with the names and TINs of MBER 15, 2022 , to file return for: ad ending on: Initial return	f this is fo all membe	r the w ers the npt orga	hole group, check this			
	<sup>i</sup> this application is for Forms 990-PF, 990-T, 4720, or 6069 ny nonrefundable credits. See instructions.	), enter the	tentative tax, less	3a	\$	0.			
	<ul> <li>b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.</li> <li>3b \$ 8,67</li> </ul>								
сE	Balance due. Subtract line 3b from line 3a. Include your pa	ayment wit	h this form, if required, by						
L	sing EFTPS (Electronic Federal Tax Payment System). See	e instructio	ns.	3c	\$	0.			
Cautio instruc	n: If you are going to make an electronic funds withdrawal tions.	(direct deb	bit) with this Form 8868, see Form 84	153-TE and	d Form	8879-TE for payment			
LHA	For Privacy Act and Paperwork Reduction Act Notice,	see instru	ictions.		F	orm 8868 (Rev. 1-2022)			