Amended Return

# Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

Department of the Treasury Internal Revenue Service

Note: The organization may be able to use a copy of this return to satisfy state reporting requirements.

1996

OMB No. 1545-0052

FO	r cale	endar year 1996, or tax year beginning	12/05	, 1996, and ending		77.	31 <b>,19</b> 97			
U	se th	e IRS Name of organization				A Emp	loyer identification num	ber		
_	lab		oundation			77-6	0443347			
		wise, Number and street (or P.O. box number	er if mail is not delivered to street	address)	Room/suite	B State	e instruction F)			
P	ease or ty	print 170 West Tasman	Drive			1999	5173			
S		Occific City or town, state, and ZIP code				<del></del>		ending, check here.		
		tions San Jose, CA 951	134-1706			1	reign organizations, chi			
H	Chec	k type of organization: X Section 501		ation	***************************************	2.0	rganizations meeting the	85% test,		
		ion 4947(a)(1) nonexempt charitable tru				1	eck here and attach co.			
		narket value of all assets at end	J Accounting method:			E If pri	vate foundation status v			
		ar (from Part II, col. (c), line 16)	Other (specify) Mo			under section 507(b)(1)(A), check here				
	≽ \$	62862912	(Part I, column (d) must be		11	unde	r section 507(b)(1)(B), cr	eck here 💆 🗀		
****	Part			On Cash Dass.)	<u> </u>	U Had	dress changed, check h	ere <b>&gt;</b> [		
		of amounts in columns (b), (c), a equal the amounts in col.(a) (see	nd (d) may not necessarily	(a) Revenue and expenses per books	(b) Net invo		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)		
	1	Contributions, gifts, grants, etc., receive	ed (att. sch.) Stmt 1 .	63919502						
	2	Contributions from split-interest trusts	********							
	3	Interest on savings and temporary casi	h investments		<u> </u>		N/A			
	4	Dividends and interest from securities,			1					
	5a	Gross rents	1 * * * * * * * * * * * * * * * * * * *	······································	***************************************			l		
	b	(Net rental income or (loss)	}					<b>!</b>		
Ą	6	Net gain or (loss) from sale of assets n		24-2-2411111111111111111111111111111111						
NE VE NU	7	Capital gain net income (from Part IV, I								
N	8	Net short-term capital gain								
E	9	Income modifications	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				······································			
	10a	Gross sales less returns and allowance	8							
	b	Less: Cost of goods sold								
		Gross profit or (loss) (attach schedule)			1		MT10020000000000000000000000000000000000			
	11	Other income (attach schedule)			100100000000000000000000000000000000000					
		,					***************************************			
O P	12	Total (add lines 1 through 11)	**************	63919502						
£	13	Compensation of officers, directors, tru				***************************************	******	81081981881881881888888888888		
R A	14	Other employee salaries and wages			<u> </u>		······			
1	15	Pension plans, employee benefits,		***************************************						
N G	16a	Legal fees (attach schedule)				······································				
Æ	ŧ	Accounting fees (attach schedule)			1	***************************************				
A	<b>!</b>	Other professional fees (attach schedu			······································					
M		Interest		<del></del>	<u> </u>					
N	18	Taxes (attach sch.) (see page 11 of the	e inst.) , . ,		1					
ş Ş	19	Depreciation (attach schedule) and dep								
Ħ	20	Occupancy								
Ţ	21	Travel, conferences, and meetings		***************************************						
Ā	22	Printing and publications								
E	23	Other expenses (attach schedule)		15000		·····		15000		
X	24	Total operating and administrative exp			-		<u>,, , , , , , , , , , , , , , , , , , ,</u>			
P E	~~	(add lines 13 through 23)	· · · · · · · · · · · · · · · · · · ·	15000				15000		
ENSES	25	Contributions, gifts, grants paid						40000		
£	26	Total expenses and disbursements (ac		15000				15000		
		Excess of revenue over expenses and						1000		
	m. (4)	(line 12 minus line 26)		63904502						
	b	Net investment income (if negative, ent				Ω				
		Adjusted net income (if negative, enter				Ŭ				

P	art I	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year		End of	year ,
Litteria		· · · · · · · · · · · · · · · · · · ·	(a) Book Value	(b) Book Valu	ie (	c) Fair Market Value
	1	Cash - non-interest-bearing,,,,	***************************************			
	2	Savings and temporary cash investments			-	
	3	Accounts receivable				
		Less: allowance for doubtful accounts				
	4	Pledges receivable >				
	1	Less: allowance for doubtful accounts				
	5	Grants receivable			1	
	6	Receivables due from officers, directors, trustees, & other disqualified persons (attach schedule) (see page 12 of the instr.)				
	7	Other notes and loans receivable				
		Less: allowance for doubtful accounts	International In			
ASSET	8	Inventories for sale or use		······································		
S	9	Prepaid expenses and deferred charges			-	
T	10a	Investments - U.S. and state government obligations (att, sch.)				·-, ··, ·· · · · · · · · · · · · · · · ·
S		Investments - corporate stock (attach schedule) See. Stmt3.		639045	72	62862912
	1	Investments – corporate bonds (attach schedule)		037043	<u> </u>	02002312
	11	•		<u> </u> 		A SA SA A A A A A A A A A A A A A A A A
	1.	investments-land, bidgs, &, equipmt.: basis  Less: accumulated depreciation (attach schedule)				
	12	Investments – mortgage loans				
	13	Investments - other (attach schedule)				
	14			 General Colonia de Calabra de Calabra (Calabra)		
	'*	Land, buildings, and equipment; basis				
	15	Less: accumulated depreciation (attach schedule)				
	19	Other assets (describe >)				······································
		Tafal access (b. 1				
	16	Total assets (to be completed by all filers - see page 13 of the instructions).		639045	02	62862912
Ļ	17	Accounts payable and accrued expenses				
Å	18	Grants payable				
A B	19	Deferred revenue,				
L	20	Loans from officers, directors, trustees, & other disqual, persons				
Ī	21	Mortgages and other notes payable (attach schedule)				
Ţ	22	Other liabilities (describe >)				
Ė			-	***************************************		
S	23	Total liabilities (add lines 17 through 22)	0		0	
		Organizations that follow SFAS 117, check here ► 🖾 and complete lines 24 through 26 and lines 30 and 31.				
NF	24	Unrestricted		639045	ງ2 📗	
E U	25	Temporarily restricted				
ח	126	Permanently restricted				
A B A L A N		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 27 through 31.				
ĘĻ	27	Capital stock, trust principal, or current funds				
ŚÑ	28	Paid-in or capital surplus, or land, bldg., and equipment fund	<del></del>			
C	29	Retained earnings, accumulated income, endowment, or other funds				
O É R S	30	Total net assets or fund balances (see page 14 of the instructions)	0	6390450	12	
	31	Total liabilities and net assets/fund balances (see page 14 of		0000401		
	<b>"</b>	the instructions)	ol	6390450	ו כו	
	irt III		<u> </u>	QD20±30	<u> </u>	
1	Total r	net assets or fund balances at beginning of year - Part II, column (a), line 30 agree with end-of-year figure reported on prior year's return)	, . , . , . ,		1	
					1	<b></b>
2	Enter 8	amount from Part I, line 27a	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		2	63904502
3	Other:	increases not included in line 2 (itemize)			3	
7 '	nuu ki	100 t, & asu 0			4	63904502
		ases not included in line 2 (itemize)			5	
6	total r	et assets or fund balances at end of year (line 4 minus line 5) - Part II, column (	b), line 30		6	63904502

Part IV Capital Gains and	Losses for Tax on Investme	ent Income	MIMM		1 800		
(a) List and describe 2-story brick ware	(b) How acquired P - Purchase D - Denation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)				
N/A			D - DOTATION				
(e) Gross sales price minus expense of sale	(f) Depreciation allowed (or allowable)	(g) Cost or oth	er basis	(h) Gain or (loss) (e) plus (f) minus (g)			
		<u> </u>		······································	······································		
***************************************							
Canadata		<u> </u>					
Complete only for assets sno	wing gain in column (h) and owned b	***************************************	***************************************	(n) Gains (Col.			
(i) F.M.V. as of 12/31/69	(i) F.M.V. as of 12/31/69 (j) Adjusted basis (k) Excess of col. (i) over col. (j), if any			col. (k), but nat l Łosses (fre	•		
· · · · · · · · · · · · · · · · · · ·							
<u></u>		<u> </u>					
<ol><li>Capital gain net income or (net capit</li></ol>	' If (loss), enter -0- in Part			2			
3 Net short-term capital gain or (loss)							
	lumn (c) (see pages 10 and 14 of the		ì				
			<u> </u>	3			
Part V Qualification Unde	r Section 4940(e) for Reduce	ed Tax on Net Inv	estment inco	ome			
If section 4940(d)(2) applies, leave this p Was the organization liable for the section If "Yes," the organization does not qualif	on 4942 tax on the distributable amou		se period?		🗌 Yes 🔲 No		
Enter the appropriate amount in eac	h column for each year; see page 15	of the instructions before	re making any en	tries.	***************************************		
(a)	(6)	(c)	<u> </u>	{d			
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharita	tble-use assets	Distribut (col. (b) divide			
1995							
1994					······································		
1993					······		
1992					· · · · · · · · · · · · · · · · · · ·		
1991							
				***************************************			
2 Total of line 1, column (d)				2			
3 Average distribution ratio for the 5-yr of years the foundation has been in	ear base period - divide the total on li existence if less than 5 years	ine 2 by 5, or by the nu	mber	3			
4 Enter the net value of noncharitable-	-use assets for 1996 from Part X, line (	5		4			
5 Multiply line 4 by line 3				5			
6 Enter 1% of net investment income (	1% of Part I, line 27b)			6			
7 Add lines 5 and 6	·			7			
8 Enter qualifying distributions from Pa	ert XII, line 4			8			
If line 8 is equal to or greater than lin on page 15.	e 7, check the box in Part VI, line 1b,	and complete that part	using a 1% tax re	ate. See the Part VI i	nstructions		

P	art VI Excise Tax on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 15 of tr	ne instr	uctions	;)		
18	Exempt operating foundations described in section 4940(d)(2), check here   and enter "N/A" on line 1					
	Date of ruling letter: (attach copy of ruling letter if necessary - see instructions)					
b	Domestic organizations that meet the section 4940(e) requirements in Part V, check here > 1 and enter 1%	1	**************************************		1970(11)11111111	بسبست
	of Part I, line 27b					
C	All other domestic organizations enter 2% of line 27b. Exempt foreign organizations enter 4% of line 27b					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter ~0~)	2		(11-11111111111111111111111111111111111	***************************************	
3	Add lines 1 and 2	3	******			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4		····w		$\vdash$
5	Tax on investment income (line 3 minus line 4 (but not less than -0))					
6	Credits/Payments:					
a	1996 estimated tax pmts & 1995 overpmt credited to 1996					
	Exempt foreign organizations - tax withheld at source					
	Tax paid with application for extension of time to file (Form 2758)					
	Backup withholding erroneously withheld					
7	Total credits and payments (add lines 6a through d)	7	100000000000000000000000000000000000000	40048000		
8	Enter any PENALTY for underpayment of estimated tax. Check here 🔲 if Form 2220 is attached.	8				
9	TAX DUE. If the total of lines 5 and 8 is more than line 7, enter AMOUNT OWED.	9				<del></del>
10	OVERPAYMENT. If line 7 is more than the total of lines 5 and 8, enter the AMOUNT OVERPAID	10				
11		11				
Pa	rt VII-A Statements Regarding Activities	L				
	During the tax year, did the organization attempt to influence any national, state, or local legislation or did it participate	······································	····		Yes	No
	or intervene in any political campaign?			1a	100	}
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 16 of the instructions for definition)?			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or d by the organization in connection with the activities.	istribute	ed			
C	Did the organization file Form 1120-POL for this year?	,	.,,,,	1c	1	2
d	Enter the amount (it any) of taxes on political expenditures (section 4955) paid by the organization during the 1996 tax year. (See instructions.)					
2	Has the organization engaged in any activities that have not previously been reported to the IRS?			2		ζ
3	Has the organization made any changes, not previously reported to the IRS, in its governing instrument, articles of incorp.	oration,				
	or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		_ <u>X</u>
	Did the organization have unrelated business gross income of \$1,000 or more during the year?			4a		X
D	It "Yes," has it filed a tax return on Form 990-T for this year?		· · · · ·	4b	N/	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		,	5		X
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument; or					
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with t	he	1			
	state law remain in the governing instrument?			6	X	
7	Did the organization have at least \$5,000 in assets at any time during the year?		[	7	X	*********
	If "Yes," complete Part II, column (c), and Part XV.					
φa	Enter the states to which the foundation reports or with which it is registered (see page 16 of the instructions)   California					
b	If the answer is "Yes" to line 7, has the organization furnished a copy of Form 990-PF to the Attorney General (or designal of each state as required by General Instruction G? it "No," attach explanation	e)		8b	Χİ	
9	is the organization claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) year 1996 or the taxable year beginning in 1996 (see instructions for Part XIV on page 22)? If "Yes," complete Part XIV	for cale	ndar	9		X
10	Did any persons become substantial contributors during the tax year?			10	X	
11a	Did anyone request to see either the organization's annual return or its exemption application (or both)?			11a		X
	If "Yes," did the organization comply pursuant to the instructions? (See General Instruction Q.)			11b	N/	
	The books are in care of ► Larry R. Carter  Telephone No. ►		L.			<del>- ^</del>
	Located at ▶ 170 West Tasman Drive, San Jose, CA ZIP code ▶ 95				~ ~	
13	Section 4947(a)(1) nonexempt charitable trusts filling Form 990-PF in lieu of Form 1041 Check here				<b>-</b> []	
	and enter the amount of tax-exempt interest received or accrued during the year	N/.	A		1	

	Statements Regarding Activities for Which Form 4720 May Be Required	
F	le Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	Yes No
1 :	elf-dealing (section 4941):	
а	During the year did the organization (either directly or indirectly):	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the organization agreed to make a grant to or employ the official for a period after termination of government service, if terminating within 90 days.)	
	···· ··· ··· ··· ··· ··· ··· ··· ··· ·	
D	If any answer is "Yes" to 1a(1)-(6), did ANY of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current Notice regarding disaster assistance (see page 17 of the instructions)?	. 1b N/A
	Organizations relying on a current Notice regarding disaster assistance check here	
¢	Did the organization engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 1996?	. 1c X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the organization was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
a	At the end of tax year 1996, did the organization have any undistributed Income (lines 6d and 6e, Part XIII)	
	for tax year(s) beginning before 1996?	
b	Are there any years listed in 2a for which the organization is <b>NOT</b> applying the provisions of section 4942 (a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942 (a)(2) to ALL years listed, answer "No" and attach statement – see page 17 of the instructions.)	. 2b   N/A
c	It the provisions of section 4942(a)(2) are being applied to ANY of the years listed in 2a, list the years here.	.   20   10/A
_	▶ 19, 19, 19	
3	Taxes on excess business holdings (section 4943):	
	· · · · · · · · · · · · · · · · · · ·	
а	Did the organization hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	
b	If "Yes," did it have excess business holdings in 1996 as a result of (1) any purchase by the organization or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the organization had excess business holdings in 1996.)	. 3b N/A
4	Taxes on investments that jeopardize charitable purposes (section 4944):	
а	Did the organization invest during the year any amount in a manner that would jeopardize its charitable purposes?	. 4a X
b	Did the organization make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 1996?	. 4b X
5	Taxes on taxable expenditures (section 4945) and political expenditures (section 4955):	
a	During the year did the organization pay or incur any amount to:	
-	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	
	· · · · · · · · · · · · · · · · · · ·	
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	
	(3) Provide a grant to an individual for travel, study, or other similar purposes? 🗌 Yes 🔯 No	
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section (509(a)(1), (2), or (3), or section 4940(d)(2)?	
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	
þ	If any answer is "Yes" to 5a(1)-(5), did ANY of the transactions tail to qualify under the exceptions described in Regulations section 53.4945 or in a current Notice regarding disaster assistance (see page 17 of the instructions)?	5b N/A
	Organizations relying on a current Notice regarding disaster assistance check here	
Ç	If the answer is "Yes" to question 5a(4), does the organization claim exemption from the tax because it maintained expenditure responsibility for the grant?	

Part VIII Information About Officers, Director and Contractors	ors, Trustees, Foundation	on Managers, Hi	ghly Paid Empl	oyees,
1 List all officers, directors, trustees, foundation managers	and their compensation (see	page 17 of the instr		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Statement 5				
		····		
		***************************************		
2 Company to a file highest and a selection (all the				
2 Compensation of five highest-paid employees (other tha	n those included on line 1 - s	sae page 17 of the ins	T	enter "NONE."
(a) Name and address of each employee paid more than \$60,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
None				
	·			
Total number of other employees paid over \$50,000				
3 Five highest-paid independent contractors for profession	nal services - (see page 18 o	f the Instructions). If	none, enter "NONE	•
(a) Name and address of each person paid more th		<b>(b)</b> Туре о	<del></del>	(c) Compensation
None				
Total number of others receiving over \$50,000 for professional s				
				<u>P</u> l
Part IX-A Summary of Direct Charitable Activities dur List the foundation's four largest direct charitable activities dur		ent etatiotheal Information	n such as the	
number of organizations and other beneficiaries served, confe	rences convened, research pa	pers produced, etc.	is such as the	Expenses
2			L	
3				
		/		
4				

P	art IX-B Summary of Program-Related Investments (see page 18 of the instructions)	<i>F</i>
	Describe any program-related investments made by the foundation during the tax year.	Amount
1	N/A	
		-
_		
2		***
3		
_		
	Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see page	18 of the instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	,
	Average monthly fair market value of securities.	12944017
	Average of monthly cash balances	
	Fair market value of all other assets (see page 19 of the instructions).	
	Total (add lines 1a, b, and c)	12944017
	Reduction claimed for blockage or other factors reported on lines 1a and 1c	
	(attach detailed explanation)	
2	Acquisition indebtedness applicable to line 1 assets	0
3	Line 1d minus line 2	12944017
4	Cash deemed held for charitable activities - Enter 1 1/2% of line 3 (for greater amount, see page 20 of the instructions) 4	194160
5	Net value of noncharitable-use assets - Line 3 minus line 4. (Enter in Part V, line 4.),	12749857
_		
	Minimum investment return. (Enter 5% of line 5.)	415680
	Title Distributable Amount (see page 20 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundation foreign organizations check here ► ☐ and do not complete this part.)	s and certain
1	Minimum investment return from Part X, line 6	415680
	Tax on investment income for 1996 from Part VI, line 5	
	Income tax for 1996. (This does not include the tax from Part VI.)	
C	Line 2a plus line 2b	
3	Distributable amount before adjustments (line 1 minus line 2c),	415680
	Recoveries of amounts treated as qualifying distributions	
	Income distributions from section 4947(a)(2) trusts	
	Line 4a plus line 4b	L
5	Line 3 plus line 4c	415680
6	Deduction from distributable amount (see page 20 of the instructions)	
_		
	Distributable amount as adjusted (line 5 minus line 6). (Also enter in Part XIII, line 1.)	415680
P	art XII Qualifying Distributions (see page 20 of the instructions)	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	15000
	Program-related investments - total of lines t - 3 of Part IX-B	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. purposes	
3	Amounts set aside for specific charitable projects that satisfy the:	
	Sulfability test (prior IRS approval required)	
þ	Cash distribution test (attach the required schedule)	
4	Qualifying distributions (add lines 1a through 3b). (Enter in Part V, line 8, and Part XIII, line 4.)	15000
5	Organizations that qualify under section 4940(e) for the reduced rate of tax on net investment income - enter 1% of	
_	Part I, line 27b (see page 21 of the instructions)	
6	Adjusted qualifying distributions (line 4 minus line 5)	15000
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation quality	ies for the

### Part XIII Undistributed Income (see page 21 of the instructions)

		(a) Corpus	(b) Years prior to 1995	( <b>c</b> ) 1995	<b>(d)</b> 1996
1	Distributable amount for 1996 from Part XI, line 7				415680
2	Undistributed income, if any, as of the end of 1995:			,	
a	Enter amount for 1995 only			0	
	Total for prior years: 19,19,19		0		
	Excess distributions carryover, if any, to 1996:				
	From 1991				
	From 1992				
	From 1993				
	From 1994				
	From 1995				
	Total of lines 3a through e	0			
4	Qualifying distributions for 1996 from Part XII, line 4:				
	<b>▶</b> \$ 15000				
	Applied to 1995, but not more than line 2a			0	
b	Applied to undistributed income of prior years (Election required – see page 21 of the instructions)		0		
¢	Treated as distributions out of corpus (Election required – see page 21 of the instructions)	0			
đ	Applied to 1996 distributable amount				15000
	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 1996	0			C
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
þ	Prior years' undistributed income (line 2b minus line 4b)		0		
c	Enter the amount of prior years' undistributed income				
	for which a notice of deficiency has been issued, or				
	on which the section 4942(a) tax has been previously.		_		
	assessed		0		
đ	Subtract line 6c from line 6b. Taxable amount -		^		
_	see page 21 of the instructions		0		
е	Undistributed income for 1995 (line 2a minus line 4a).  Taxable amount – see page 21 of the instructions			n	
f	Undistributed income for 1996 (line 1 minus lines 4d and 5).		l l	, in the second	
,	This amount must be distributed in 1997			Section 1	400680
7	Amounts treated as distributions out of corpus to satisfy			1	
•	requirements imposed by section 170(b)(1)(E) or				
	4942(g)(3) (see page 21 of the instructions)	0			
8	Excess distributions carryover from 1991 not applied on line 5 or line 7 (see page 22 of the instructions)	0			
9	Excess distributions carryover to 1997 (line 6a minus lines 7 and 8)	0			
10	Analysis of line 9:	U			
	Excess from 1992				
	Excess from 1993				
	Excess from 1994				
	Excess from 1995				
	Excess from 1996				

Form 990-PF (1996)

P	Part XIV Private Operating Foundations (see page 22 of the instructions and Part VII-A, question 9) N/A								
12	1a if the foundation has received a ruling or determination letter that it is a private operating foundation,								
ł	b Check box to indicate whether the organization is a private operating toundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5).								
	Tay year								
<i></i>	Enter the lesser of the adjusted net income from Part I or the minimum investment return	(a) 1996	<b>(b)</b> 1995	(c) 1994	(d) 1993	(e) Total			
	from Part X for each year listed								
	85% of line 2a				-	······································			
(	Qualifying distributions from Part XII, line 4 tor each year listed								
d	Amounts included in line 2c not used directly for active conduct of exempt activities								
6	Qualifying distributions made directly for active conduct of exempt activities								
3	(line 2c minus line 2d)	44							
8	"Assets" alternative test - enter:								
_	(1) Value of all assets.				İ				
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)								
	"Endowment" alternative test - Enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed								
ć	"Support" alternative test - enter:					**************************************			
	(1) Total support other than gross investment income (interest, dividends, rents,								
	payments on securities loans (section 512(a)(5)), or royalties)								
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)								
	(3) Largest amount of support from an exempt organization		***************************************						
STOTOY	(4) Gross investment income								
P	Supplementary Information (Co year – see page 22 of the instructions.	omplete this part or )	ly if the organization	on had \$5,000 or mo	ore in assets at any	time during the			
1	Information Regarding Foundation Managers:	······			***************************************	***************************************			
2	List any managers of the foundation who have cont tax year (but only if they have contributed more than	ributed more than 2' n \$5,000). (See secti		outlons received by the	he foundation before	the close of any			
t	List any managers of the foundation who own 10% other entity) of which the foundation has a 10% or g		ot a corporation (or	an equally large por	tion of the ownership	ot a partnership or			
1	Jone								
	Information Regarding Contribution, Grant, Gift,	Loan, Scholarship.	elc Programs:		:	**************************************			
	Check here ► ☐ if the organization only makes co funds. If the organization makes gifts, grants, etc., (sitems 2a, b, c, and d.	ontributions to presel	ected charitable orga	anizations and does duals or organization	not accept unsolicite s under other conditi	d requests for ons, complete			
s	The name, address, and telephone number of the p	nereon to whom ann	inations should be a	oddroecad	<del>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</del>				
	See Statement 6	ocison to whom app	ications should be a	kudi essed.					
	The form in which applications should be submitted	l and information an	natariaia thau ahar	ald include:		······································			
	ritten request with 501(c)		·	aig iisgides,	•				
	Any submission deadlines:	( w )							
1	Jone								
d	Any restrictions or limitations on awards, such as by	geographical areas	, charitable fields, kir	nds of institutions, or	other factors:				
-	RC 501(c)(3) organizations	only							

3 Grants and Contributions Paid Durin	g the Year or Approved for	or Future Pa	ayment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	or substantial contributor	recipient	CONTINUE	
Name and address (home or business)  a Paid during the year  None	any foundation manager or substantial contributor	recipient	contribution	
Total			▶ 3a	
b Approved for future payment				
Total			<b>▶</b> 2k	

### Part XVI-A Analysis of Income-Producing Activities

inter gross amounts unless otherwise indicated.		Unrelated business income E		Excluded by sect	(e)		
- -	1 Program service revenue:		(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 23 of the instructions.)	
	service revenue:					THO MOSI MOSIONARY	
_		<b></b>					
-		{ 			ļ		
· —							
* =======	and contracts from government agencies						
	ship dues and assessments						
	on savings and temporary cash investments						
	ds and interest from securities						
						\$560808000000000000000000000000000000000	
	financed property						
	ebt-financed property	<b>!</b>		<u> </u>			
	al income or (loss) from personal property		···········				
	vestment income						
	(loss) from sales of assets other than inventory						
	me or (loss) from special events			!			
	rofit or (loss) from sales of inventory						
	venue: a						
b							
rei.							
e					***************************************		
2 Subtotal	(add columns (b), (d), and (e))				***		
3 TOTAL	(add lines 12, columns (b), (d), and (e))				<b>&gt;</b> 13	0	
(See wo	rksheet in line 13 instructions on page 23 to verify	calculations.)					
Part XVI	Relationship of Activities to the	Accomplish	ment of Exemp	t Purposes			
**************************************							
Line No.	Explain below how each activity for which inco of the organization's exempt purposes (other the	me is reported in	n column (e) of Part	XVI-A contributed	importantly to the ac	complishment	
······	N/A	and by browning	idida idi sacii parp	oses). (See page	23 OF THE HISHBOURN	5-}	
	I XY FI			· · · · · · · · · · · · · · · · · · ·			
· · · · · · · · · · · · · · · · · · ·						ж	
<del></del>				······································			
***************************************				······			
···-							
		***************************************			·····		
					···		
					··········		
		······································				<u></u>	
·····							
			······			· · · · · · · · · · · · · · · · · · ·	
					· · · · · · · · · · · · · · · · · · ·		
	<u> </u>						
	<u> </u>						
					***************************************		
	<u> </u>						
		·····		V	~		

Form 990-PF (1996) Cisco Systems and Atlan 77-044334

Part XVIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1	Did the	organization directly	or indirectly engage in any	of the following with	n any other org	janizatio	n described in	section 50	r1(c)		Yes	No
2			ion 501(c)(3) organizations organization to a nonchar			ical orga	nizations?					
-										1a(1)		<u>                                </u>
										a(2)		+
b		Transactions:										
	(1) Sa	les of assets to a nonc	charitable exempt organiza	ation						b(1)	101900161	ΙΣ
			n a noncharitable exempt o							b(2)		2
			ipment							b(3)		2
			ments							b(4)		7
			s							b(5)		Σ
			or membership or fundral							b(6)		}
C	Sharin	g of facilities, equipme	ent, mailing lists, other asse	ets, or paid employe	es			,	• • • • • • • • • • • • • • • • • • • •	C		Σ
đ	of the	goods, other assets, o	bove is "Yes," complete the or services given by the rep arrangement, show in col	orting organization.	if the organiza	tion rece	ived less than	fair market	t value t value			
	ine no.	(b) Amount involved	(c) Name of nonch	aritable exempt organiza	tion	(d) De	scription of trans	fers, transac	tions, and shari	ig arrang	je weu.	ts
N/.	Α.											
										***************************************		
						·····	***************************************					
				***************************************								
							······································					
											<del></del>	
					······································							
									······································			
				····					······································	·····		
		***************************************								····		
***************************************					·····				····			
				***************************************								
								***************************************				
	section		r indirectly affiliated with, o other than section 501(c)(3 ng schedule.							] Yes	×	No
		(a) Name of orga		(b) Type of	organization			(c) Descripti	ion of relationsh	ip		
N/	A.										••••••	************************
		***************************************										
			·····				***************************************					
										······································		
********	rt XVI	***************************************	***************************************			0.73.0				······································		
			availability of the annual repayment > San Jose	- •	ewspaper >	LZ/10	1/3/					
			ate that you have attached	<del></del>	nanor notico re	ratired b	atha inetruction	no on noo	o 24 (it the n	ation is	not	
•			onsidered incomplete.)	a copy of the flewsh	zaper rouce re	iquii eu p	у по пывасас	nis on pay	e 24. (n nie n	ouce is	HOT	
			I declare that I have exam	nined this return, incl	uding accomp	anving s	chedules and	statements	and to the h	est of	m	
PLE	knov		true, correct, and comple									
LEASE							k.					
	<b></b>						<b>_</b>					
5	Sig	nature of officer or trustee	!			ate	7	Title				
G N	P U	Preparer's			Date		Checkit	1	Preparer's socia			
Ħ	PEE	signature Mic	chael Fontanel			·····	selt-employe	ı ▶□	041-36-	059	0	
H R R			Delagnes, Mi		inder							
ı	คี่	if self-employed) and address	300 Montgome		te 1050	)			4-29417	/84		
	San Francisco, CA ZiPcode ➤ 9410							<b>▶ 94104</b>				

96	Federal Statements	Page 1
	77-0443347	
Statement 1 Form 990–PF, Part I, Line 1 Contritutions, Gifts, and Grants		
Direct Contributions:		
Contributor's Name	Contributor's Address	Amount of Contr.
Cisco Systems, Inc.	170 West Tasman Drive San Jose, CA 95134	\$ 15000
Cisco Systems, Inc.  Description : 969,14  Date Received: 5/12,	170 West Tasman Drive San Jose, CA 95134 15 sh Cascade /97	40004501
Cisco Systems, Inc.  Description : 484,53  Date Received: 5/30,		2000001
Cisco Systems, Inc.  Description : 300,00  Date Received: 5/30,	170 West Tasman Drive San Jose, CA 95134 00 sh CyberCash /97	3900000
Total Direct Contribution	ons	\$ 63919502
Total Contributions		\$ 63919502 =======
Statement 2 Form 990-PF, Part I, Line 23 Other Expenses Outsourcing sérvices		. \$ 15000
	Total	\$ 15000

196	Federal Sta				Page 2		
Cisco Systems Foundation					770443347		
Statement 3 Form 990–PF, Part II, Line 10b Investments – Corporate Stocks							
Corporate Stoo	cks		l Book Va				
1,453,663 sh Cascade Commu 300,000 sh CyberCash	unication		39000	000 480			
		Total	\$ 639045 ======				
Statement 4 Form 990–PF, Part VII–A, Line 10 Substantial Contributors during the tax	x year						
Cisco Systems, Inc.							
Cisco Systems, Inc. 170 West Tasman Drive San Jose, CA 95134	-						
170 West Tasman Drive	nd <b>Key Employees</b> Title & Hrs/wk d			Employee Ben. Pln Contrib.	Account		
170 West Tasman Drive San Jose, CA 95134  Statement 5 Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Trustees, and	Title &	levoted  B of T		Ben. Pln	Account Other		
170 West Tasman Drive San Jose, CA 95134  Statement 5 Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Trustees, an  Name and Address  John P. Morgridge 170 West Tasman Drive	Title & Hrs/wk d	levoted 	Comp.	Ben. Pln Contrib.	Account Other		
Statement 5 Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Trustees, and  Name and Address John P. Morgridge 170 West Tasman Drive San Jose, CA 95134 John T. Chambers 170 West Tasman Drive	Title & Hrs/wk d Chairman Part-Tim Presiden	levoted  B of T  e  tt  sident	Comp. 	Ben. Pln Contrib.	Account Other		
Statement 5 Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Trustees, and  Name and Address  John P. Morgridge To West Tasman Drive San Jose, CA 95134  John T. Chambers To West Tasman Drive San Jose, CA 95134  Barbara Beck To West Tasman Drive	Title & Hrs/wk d	levoted  B of T  e  it  ie  sident  ie	Comp. 0	Ben. Pln Contrib.	Account		

1996

## **Federal Statements**

Page 3

Cisco Systems Foundation

77-0443347

Statement 6
Form 990–PF, Part XV, Line 2a
Name and Address of person to whom applicants should be addressed

Julia Ward 170 West Tasman Drive San Jose, CA 95134 408-526-4000

(469) 727-3393 Latayene & Martin S.Ciara fit you have Lost/Found a pet in the Unincorporated areas of Senta Chera Chry, incl. 80, Sen Jose, please contact the Animal Shetter in Sen Martin (Morgan Hilb (489) 483-498

BOXER smer Female, tar Cottle/S, Teress, 977-2510

CHIMUANUAS MAF Wis/bre Willer/Box, Cupt. 255-7485

DALMATIAN 11/28 3rd & Hedding name: Pryo 371-4467

GERMAN Shiro/Whippirk, F., SJ Civic Ctr. 11/29 388-0188

GOLDEN shephard-X, F, less seen at Senta Tersee & Sen ignacio, Sen Jose, 227-CARE

LAS YIW F. Almaden/ Oak Carryon Dr. 11/24. Purple collar/no tags, answers to Sammy, Reward. 265-2750

PITBULL, while w/kgrit spots. M, blue coller, very mendly. Los Gatos, 358-1386

POMERANIAN, F. Almader Exp./Pactord, 723-2470

PUG. \$400 Reward, Wiltord & Pandes Aves, Fremors, Favef, pushed-in face, carty talk Safe return, no questions asked, Stave 510 794-0418

ROTTWEILER F. 6 yrs 12/ Baum. Vly area 972-1962

SHEPHERD Mm. F. 45 bal bill/map w/bill, left tyre blue, ng/st bi/brs, L.G. bills: Ficks/ Reymolds Rd. 9/20/97 \$1000 REWARCH. Pronds, 927-9258

SMALL brown M w/wts che soil w/ting 'Toto' 452-0916

REWARD Semine Min Dog F blk/tan/witi Scott/Hornsto San Mateo Ings 245-7135

LAS Retnever Rescue
Adoptions and Pleowhents
Corract: (415) 361-0261

#### 1401 Dogs found

14H2 SERVICE NOTICE Free Found Ade Free Found Ade Mercury News Classerhed will publish free of charge two fire acts for four consecutive days submitted by individuals who find stray pass & items. Cell 920-5111

LOST/POUND Pute? Numerie Society of SCV (400 727-230) Myette & Martin S.Clera

If you have Lost/Found a pet in the Uniscorporated areas of Senta Cara Crity. not. Bo. Sen Jose, please contact the Animal Shaller in Sen Markin (Mongan Hill) (480) 483-4386

CRINUANUA, M. found 12/6, brown/white, 292-5504

FOX Terrain, and IV Soul Exp. on 12/8 379-4568

PIT Bull this whi chest, purple coller, 406 729-7427

SNEPHARD met sent young tound Gêroy 12/2 778-7777

SKEPHRRD MIX, young, at Allen/Bleam H# 261-1965

SNEPHEED, Found Ever-press Area, 406 274-2555

DOG found Lincoln Av/Pine Willow Glen, 406 448-0770

SMALL wis dog. Capitol/A-born 532-6966 frou describe)

#### 1405 Other pets lost

CAT F, 2yrs, 10ths, don't short hear, with w/brwn stripes on left 8 sers, purple coller w/ pearls. Nr Asiar Evelyn, Sun-rhyvels, 567-8669, REWARD!

CAT Grey/White M. med heir. Mckeen/Fortini 268-4247

CAT Leopard Sengel M, bwn w/blk apots, no tak, Losi 12/3 Monroe/ElCamino, \$390 new 247-1087

CAT to pray bre M tabby bkr coller "Figero" S'vele 749-9580

CAT Lig M Linghy Tan/Bilk teb-by 'Cody' Koser/Dent Pose Vapped/dumped 449-1515

DIAPER bac grn/whi. no nai Rd, SSJ, 1st step :( Paward 227-SJ RANIAN passport, Carl Gholam Farahari 855-0 REWARDI Lost mg & Luckys Blam, Ha. Pat 406 283-6272 RING sepph/drind bnd. Sente Terres hosp. Plant 583-4805 WEDDING Bings remes en-graved inside Gay & Karen. Reward 510 713-2548

1411 Items found

1450 Personals

WATCH at VFeir, Rescond: Box 610754, SJ 95161-0754

ARE: Nice older widower, ethi-cal, prof. You: Nice woman, ethical, lonely also, fueta do X-Mas together 510 490-5964

SMART RECOVERY Out dreking, Stay out, No higher power, 739-7230

VOLUNTEER opportunities

American Canoer Society Vokumeer Dept., 287-5973

ALCOHOLICS ANONYMOUS 24 7r. help with drink problem, 406 374-8511

ALICE LOOPER, ols call Call Sigh's mother 406 267,4486

Check us out http://www.aspect.com

http://www.aspect.com TNE Annual Return of Caco Systems foundation is available upon request for inspec-tion within 180 days of this notice at it's principal office located at 255 W. Tasman Dr., San Jose, CA. 408 526-8211, and the name of it's environmentager at

8's principer manager is Larry R. Carter REMONT UPISD. Our youth Second Se-long learners.

MOTICE TO ADVENTISERS AND READERS.
Only licensed Travel Aperts & Ticket Brokers may adventee Aires Tickets, Youchers & Award Certificates, Transfer of these documents among pvt. perises is not permitted by the Airine industry.

LAST MINUTE TRAVEL Air rewards wanted OW from \$185; RT from \$350 415 969-2060

FLY NOW-CHEAP! S.G.T # 2033-577-40, 406-263-8849

DOMESTIC had mirete travel ir \$299 RT. 1 888 66 Mirage

UNERATABLE LOW FARE. Comestic & INT 415 392-8111

BUY Air Awards Incl. SW 1-800 733-9421 CA

R+S to After season tickets \$1500 3 seats playoff tickets evell, 929-7160

49'ER Playoffs

Nutcracker \* Phantom

Show Boat \* Riverdance

Yanni \* Stars on Ice Sharks \* Elton John

All Events Weckhelde Including New York

SAN JOSE BOX OFFICE

800 97 tickets

408 246-1160

**ELTON JOHN** 

49'ers

49'ers/Denver

Premier tix

\* 408 971-3400 \*

WANTED --

1497 Tickets, events

1495 Tickets, travel

1480 Special notices

ALL CONCERTS & THEATRE

Sharks Raiders Warriors

Want: 47 ERS/DENVER

WANTED: 47ER'S Open Sam-Som Divry Avi

49er's

ELTON JOHN PUFF DADDY

STORE STORING

MR TICKET 1-800 424-7328

RAIDERS - STARS ON ICE 49 ERS SWARKS

**ELTON JOHN** WANTED: 49'ERS/DENVER SOUTH SAY TICKETS 2242 Camden Ave # 182 SJ 408 371-2225

ALL EVENTS RUY & SELL

- WANTED -49ERS/BRONCOS 408 971-3400, 7am-11pm ASK FOR STEVE SMITH

WANTED 49ers & ELTON JOHN 1\*800\*523\*1515 www.ticketfinder.com

Tix! 2-All Events Nationwide 47ER RIGHTS + playoff Ex in sec. 20 now 8, lower box, about 30 yd. Sne (2) grt. seets \$3000 ss. 406 235-3297

49°ERS

(406) 371-2225

WANTED

WANTED 47ERS VS. DENVER 510 337-8855, 510 864-8500 WANTED 49'ERS 415 943-0454

SHARKS by circ seats sec 115, 116, all remaining games avail, 406 667-1955 LAKERS Vs. Warriors, sec. 202 Pow 8, & sec. 215, row 15 840 ss. 408 951-8412 87 ERS/Desiver(4) UR18 Row 8, 8500 se/box other seets avail 406 961-8462 237-1027 PERS/Viktnes, 45 yard fins, 4 fix Incl. prict, \$100 ea 405 605-2929

Pers/Brence (2) tix apper res. \$300; Playoff tis; Season rights \$2900 406 625-0426 WARRIORS at cost (X-mas pres.)? trade Sharks, 49ers, etc. Deliver 510 653-6839

#ER '98 season tix w/reervol perking & playoffs. \$4949 728-3204 call after 8 p.m. SMARES 2 Nx mec 115 & 2 Nx mec 121, 408 452-1083

RAIDERS sec 218 club seats 6 lickets, 406 452-1063 SHARKS lower, rw 19 corner, 1-3 exets, all games 736-3235

RAIDER Schets, 1st level, all contres, 408 378-1715 987198, 408 378-1715 67ER/DENYER (4) 1st row. 50 yrd 8500es 650 984-0409

RAIDERS/Semewas 2 exc. 8-109, 12/14 \$65 ee. 237-0665 #9ERS vs. Vikings/Broncos 406 539-5001-por: 965-1309 \$HARK\$ (2) sec 123 row 14, many pames, 406 972-5262 FIR TICKETS WANTED

WARRIORS as games. \$15-390 650 324-2200

RAIDER SX. 35 yd lene, 12/14 & 12/21, 406 535-5555 # 12/21, WO 505-0050
PER/Desver 4 tix + perking
pass \$200 m. 408 SOLD
PERE VS Vikings 2 @ face
value \$45m 415 664-0653
WARRIORS VI Bulls 2 mc 225
\$140m 415 864-0653

#FRS/Deaver, 2 tx/hwr ree, sec. 36, rw 3 \$300 \$23-5021 ###/DENVER 2 8x sec. 9, row C \$160 as. 406 365-9674

478 RS/Brances 2 Nx. \$200 as. 867-9588

#7# K3/UNIVI 2 SIX INIT FEE SEC 25, FW 23, \$190/ee 741.5517 ELTON John, SJ, Floor/3 Plow 14 \$250/ee 559-0429 #Per vs Denver, 2-tix, Sec. 15, her ree. \$390/pr 245-1003

47ER/Denver lower box 17, 2 fix \$185 ea./obo 733-1705 RAIDERS v Seehawks sec 105 nw 4, 2/\$25 es. 720-8449 RAIDERS/MERS \$10 653-6839. Will deliver. 4 Rose Bowt to 1/1/96 WSU vs. Mich 738-2406

GREENDAY (6) Dec. 14 \$35 ms. 406 \$52-0996 pgr/vm

EMPLOYMENT CLASSIFICATIONS 3100-3400

3100 Employment offers domestic

BASYSITTER S'togs. Kids 2 & 6. M-Th is 1/1. CDL Refs. Live-in/out. Eve- 867-7323 BASYSITTER Playrus week-ends 3 any kids 286-9592 eve #ASYSITTER meture, PT, yrs & 9 mos. 550-335-6732 CHILDCARE, Driving rec. FT/ PT, 9ve-in/out. N/S, Fax re-sume 408 356-2140

BUTTLE 408 300-z im:
CHILDCARE Creative, anerpetc. PT-FT, pd DAV nc. a
must. Sel, negot. 224-4524
CHILDCARE ASST. F/T in
S'Clara home. 248-0364

S'Cara home, 248-0384
NOUSEKEEPER, live in, for active pare him 406 729-0019
HOUSE PAPENT board & care society. F/T. Eury, Refs., red., \$1400 set. Martin Hail, 443
S. 11th St SJ 95112 279-8892
NANNIES, TOP JOES
TAC, Narwies, & Mothers in Deed, 650 326-8570
NANNY 2 boys, \$ & 2, FT, start Jen. 408 265-1678
NANNY 2 boys, \$ & 2, FT, start Jen. 408 265-1678
NANNY 2 boys, \$ & 3, Ethers.

start Jant. 408 265-1678
MARNY axp. live out, 1 intart, MS axp. ref req. FT 954-4960
NAMNY FT, live-in, no chác prive/out w/châc olavy. Ever-greets area. Fieler, & DRIV nector reg. 4.06 28-1093
MARNEY FT/PT Exp'd. Meture Selevy \$1000-82200/noreth Good refs & visid CDL reg d. Calt. 2nd MCM 415 855-2469
NAMNY 90-35 Ins., 1 srfart.

NAMNY 30-35 hrs., 1 artent. Live out, N/S, valid CDL w/ gd rec. Exp. & refe. reg/s. Loe Ahos. 850 909 9588 NANNY/HSRer FT, Live-In, N/S exp. refs reg. 227-8538

MARKY Invent, S'Carlos, Lov-ing indiv. to help morn. 1 tod-der, twins due, 500 210-6962 MANNY - Loving care of intent girl in Mt. View, 4 days 9-8 \$13/hr. Exp. reod. Stanford Park Naryses 408 370-0174. MARKY PT 3-day wit. Cuper-tinc home for 20 mc old, Eng-lish, spilg, Flets 406 446-4560

#### 3305 Employment offers hm. health care

AIDE for disabled woman, eves., for part rent, Must transfer, 408 738-0157

AIDES Council on Aging FT Staff Aides positions \$8.10/ hr. Pd med/den, Valid driv. No. & car req. Ed 296-8290 AIDE, Wixand morning, \$8/hr

to start, some litting, will train, refs/car, 266-2067 CAREGIVER Mon-Fr. 8-4pm. Exp. w/Alzheimers necess. Clean DMV, Engl. spkg. Send resumer 382 #1/2 Curtner Ave. Palo Alto 94306.

CAREGIVER female, live-in needed M-F and/or Sat/Sun. CMA or expld. Light historia. Speak Engl. Refs. 296-3861 CAREGIVER Live-in/English epeaking only. \$100/day. epeaking only. \$10 415-379-9045.

CAREGIVER Day time/serty AM care for elderly women. Campbel Ares 406 577-2259

TROUGH ASSISTANT INSURANT Cod for worder, the prig a personal time, CNA is, not red, 200-0178 MANAGER

st, not req. 280-0178
st, not req. 280-0178
for non-profit. Hering & plecing
71-borne worksets. Full benefills & competitive salery,
DOC. Send resume & select
record on Aging,
stre LMH 2115 The Alameda,
San Jose, CA 95128
SCHEDULER/Coerdinater
of in-home support workers

SCHEDULER/Coordinator
of in-home support workers
for non-profit. Full benefits &
completive salary. ODE.
Send reasons & select to the
Council on Aging, stor. LMH
2115 The Alameda,
San Jose, CA 95126
ASSST THE ELDERLY at
home complements and hymselections.

home compensore and ho helpers needed. Flexible: tone mail. Call Home Inc. Serior Care 988-0407

LIVE-in & hity wit w/stoerty resolve care to DOs 266-8331

### 3115 Persons seeking employment

ACCOUNTING/\$eekkeepar F/C. OuickBooks, pic mami, very expensiond, 723-0177 ADULT Adde 11pm-7em, or ive-st. Nurse asp. 269-7908 ADULT/Ester Care, bonded, exi'd, Fefs. Live-in/out, Af-fortable, 408 554-0639

fortable: 406 554-0509
AIDE, elderly care, sive-in,
15vrs exp refs 850 965-2929,
ASSEMBLY or REPAIR
electr. mech., or electronic
devices? I have spece, equip,
a knowledge, 850 568-0640
BASYSITTER, your home.
F/T, w/ exp. & car, Referances avail, 406 729-4546. ercos evail 406 729-4546.
CHINESE Manciarin improseption invall for presental features of the sons or corporate group propriets. Teaches both beginners and higher level speakers Specializes in Business Chinese, written or oral, Tutor has 20+ years of business axperience in Asia. Please call 510 770-1779 or omal gen29@x.hetcom.com offital Photo-PC consult. Floory output 650 959-6672 ELDERLY CARE, UN+ In or CA, Gd, rets. Exp. Call anytime 24 hrs. 650 424-8659

ELDERLY care, exp. pvr du-ly, hrly, dy or ev, riels, Tess, 408 739-8307; por 539-1497 GUTTRE Clearing Moving Helo-Landscaping 749-8791 HANDYMAN w/reis, will work for reduced, reent, Call Bob at 559-8506 by mag) HANDY Man, od serv. cheed, buck, gd. rets. 650 426 1937 HELPER: mi., child care iv-in exteriv, deable, cook, clothes

HELPER CEIL, COM DECENTION AND MARKET PARTY COMPANY OF THE PROPERTY OF THE PRO HOME repair & improvement by retired builder 251-1267 HOUSECLEANING meticalous dependable, responsi 246-2216 after 3 pm.

HOUSE Cleaning specializing in bidgs, homes, stones, carpet 8 windows, 406 923-0785 HOUSECLEANING \$10/hr. Refs. 406 261-0605

HOUSECL EANING, depend able, responsible 267-0731 HOUSECL EARING, WINDOWS brd writ, cheep 850 428-1937 HOUSECL EAN 201/204, liv, rm 8 kach \$55, 408 362-1281 m a xacn 355, 408 382-1281 HOUSECLEANING No. S.J., Mibts, Francial 408 945-7779 HDUSECLEANING good re's 7 yrs, exp. 550 97-8804 NANNY 32 yrs old, seeking the right startly, sive in/out. Immed, Febecca 445-2222

NUTRITIONIST/Heme

for weight total 225-7031 SINGER, Marissa Ethnoge Pat Benetar like vocalist -5 yrs. classes traume, Kristin 415 941-9333 M-F 8:30-5:30 YARDGARDENING, Circup. hrd write, cheep 650 428-1937

WANTED Free rm in each for housework etc. quiet male lew student. Chris 985-9713

# 3120 Temporary emplyr.

ACCOUNTANTS ON CALL Sen Jose (408) 437-9779 Palo Alto (415) 326-8400 ANN WELLS PERSONNEL Survivale 738-8622 Jobs Plus 408 383-0426

STAFFING Network Pers. Temp-Perm. (406) 733-8000

ON-LINE THE A 31.70 Em @ ABI Senoma (

ACC ACCOU ACC 406 293-96 ACCOUN

Accu ACER

AC Action

ÄC Act 1 Te ACUREX

> ADE C A&D I ALD I

ADI I

Major A Adva

ADVAN ADVANCE ADV A DE

Advantag ΑÜ

Aehr 1 **Aero** Aeron AE

**AFFYMAX** ٨F

PHARA AimQue

AIO Fax ( AIR: Air Te

ATTECH **AXASH** ALAS

ALCATEL

San Jose Mercury / December

10,1997

6 California Statements		Page 1	
	Cisco Systems Foundation	77-044334	
Statement 1 Form 199, Part I, Line 3 Contributions, Gifts, Grants, and	Similar Amounts Received		
Direct Contributions:			
Contributor's Na	me Contributor's Address	Amount of Contr.	
Cisco Systems, Inc.	170 West Tasman Drive San Jose, CA 95134	\$ 15000	
Cisco Systems, Inc.  Description : 969, Date Received: 5/1		40004501	
Cisco Systems, Inc.  Description : 484,  Date Received: 5/3	170 West Tasman Drive San Jose, CA 95134 518 sh Cascade 0/97	20000001	
Cisco Systems, Inc.  Description : 300, Date Received: 5/3		3900000	
Total Direct Contribut	ions	\$ 63919502	
Total Contributions, L	ine 3	\$ 63919502	
Statement 2 Form 199, Part II, Line 17 Other Expenses Outsourcing services .	Total	\$ 15000 \$ 15000	