

**Exempt Organization Business Income Tax Return  
(and proxy tax under section 6033(e))**

**2020**

Department of the Treasury  
Internal Revenue Service

For calendar year 2020 or other tax year beginning \_\_\_\_\_, 2020, and ending \_\_\_\_\_, 20\_\_\_\_

▶ Go to [www.irs.gov/Form990T](http://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).

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

<b>A</b> <input type="checkbox"/> Check box if address changed.		Name of organization ( <input type="checkbox"/> Check box if name changed and see instructions.) GORDON E. AND BETTY I. MOORE FOUNDATION	D <b>Employer identification number</b> 94-3397785
<b>B</b> Exempt under section <input checked="" type="checkbox"/> 501(C)(3) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a) <input type="checkbox"/> 529A	<b>Print or Type</b>	Number, street, and room or suite no. If a P.O. box, see instructions. 1661 PAGE MILL ROAD	<b>E</b> <b>Group exemption number</b> (see instructions)
		City or town, state or province, country, and ZIP or foreign postal code PALO ALTO, CA 94304	
<b>C</b> Book value of all assets at end of year . . . . .		8,574,582,511.	<b>F</b> <input type="checkbox"/> Check box if an amended return.
<b>G</b> Check organization type ▶	<input checked="" type="checkbox"/> 501(c) corporation	<input type="checkbox"/> 501(c) trust	<input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust <input type="checkbox"/> Applicable reinsurance entity
<b>H</b> Check if filing only to ▶	<input type="checkbox"/> Claim credit from Form 8941	<input type="checkbox"/> Claim a refund shown on Form 2439	
<b>I</b> Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation . . . . .	<input type="checkbox"/>		
<b>J</b> Enter the number of attached Schedules A (Form 990-T) . . . . .	▶ 2		
<b>K</b> During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If "Yes," enter the name and identifying number of the parent corporation ▶
<b>L</b> The books are in care of ▶ JANCY GOH	Telephone number ▶ 650-213-3000		

1661 PAGE MILL ROAD  
PALO ALTO CA 94304

**Part I Total Unrelated Business Taxable Income**

1 Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions). . . . .	1	1,390,891.
2 Reserved . . . . .	2	
3 Add lines 1 and 2 . . . . .	3	1,390,891.
4 Charitable contributions (see instructions for limitation rules) . . . . .	4	139,089.
5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3 . . . . .	5	1,251,802.
6 Deduction for net operating loss. See instructions. . . . .	6	
7 Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5 . . . . .	7	1,251,802.
8 Specific deduction (generally \$1,000, but see instructions for exceptions) . . . . .	8	1,000.
9 <b>Trusts.</b> Section 199A deduction. See instructions. . . . .	9	
10 <b>Total deductions.</b> Add lines 8 and 9 . . . . .	10	1,000.
11 <b>Unrelated business taxable income.</b> Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero. . . . .	11	1,250,802.

**Part II Tax Computation**

1 <b>Organizations taxable as corporations.</b> Multiply Part I, line 11 by 21% (0.21) . . . . . ▶	1	262,668.
2 <b>Trusts taxable at trust rates.</b> See instructions for tax computation. Income tax on the amount on Part I, line 11 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041). . . . . ▶	2	
3 <b>Proxy tax.</b> See instructions . . . . . ▶	3	
4 Other tax amounts. See instructions . . . . .	4	
5 Alternative minimum tax (trusts only) . . . . .	5	
6 <b>Tax on noncompliant facility income.</b> See instructions . . . . .	6	
7 <b>Total.</b> Add lines 3 through 6 to line 1 or 2, whichever applies . . . . .	7	262,668.

For Paperwork Reduction Act Notice, see instructions.

**Part III Tax and Payments**

<b>1 a</b> Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) . . . . .	<b>1a</b>		
<b>b</b> Other credits (see instructions) . . . . .	<b>1b</b>		
<b>c</b> General business credit. Attach Form 3800 (see instructions) . . . . .	<b>1c</b>	203,251.	
<b>d</b> Credit for prior year minimum tax (attach Form 8801 or 8827) . . . . .	<b>1d</b>		
<b>e Total credits.</b> Add lines 1a through 1d . . . . .	<b>1e</b>		203,251.
<b>2</b> Subtract line 1e from Part II, line 7 . . . . .	<b>2</b>		59,417.
<b>3</b> Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach statement) . . . . .	<b>3</b>		
<b>4 Total tax.</b> Add lines 2 and 3 (see instructions). <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here . . . . .	<b>4</b>		59,417.
<b>5</b> 2020 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 4 . . . . .	<b>5</b>		
<b>6 a</b> Payments: A 2019 overpayment credited to 2020 . . . . .	<b>6a</b>	1,000,000.	
<b>b</b> 2020 estimated tax payments. Check if section 643(g) election applies <input type="checkbox"/> <b>6b</b>	<b>6b</b>		
<b>c</b> Tax deposited with Form 8868 . . . . . <b>6c</b>	<b>6c</b>		
<b>d</b> Foreign organizations: Tax paid or withheld at source (see instructions) . . . . . <b>6d</b>	<b>6d</b>		
<b>e</b> Backup withholding (see instructions) . . . . . <b>6e</b>	<b>6e</b>		
<b>f</b> Credit for small employer health insurance premiums (attach Form 8941) . . . . . <b>6f</b>	<b>6f</b>		
<b>g</b> Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other _____ Total <b>6g</b>	<b>6g</b>		
<b>7 Total payments.</b> Add lines 6a through 6g . . . . .	<b>7</b>		1,000,000.
<b>8</b> Estimated tax penalty (see instructions). Check if Form 2220 is attached. <input type="checkbox"/> <b>8</b>	<b>8</b>		
<b>9 Tax due.</b> If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed . . . . . <b>9</b>	<b>9</b>		
<b>10 Overpayment.</b> If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid. . . . . <b>10</b>	<b>10</b>		940,583.
<b>11</b> Enter the amount of line 10 you want: <b>Credited to 2021 estimated tax</b> <input checked="" type="checkbox"/> 940,583. <b>Refunded</b> <input type="checkbox"/> <b>11</b>	<b>11</b>		

**Part IV Statements Regarding Certain Activities and Other Information** (see instructions)

	Yes	No
<b>1</b> At any time during the 2020 calendar year, did the organization have an interest in or a signature or other authority 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>▶ ATCH 2</b>	X	
<b>2</b> During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? . . . . . If "Yes," see instructions for other forms the organization may have to file.		X
<b>3</b> Enter the amount of tax-exempt interest received or accrued during the tax year . . . . . <b>▶ \$ 63,040.</b>		
<b>4 a</b> Did the organization change its method of accounting? (see instructions) . . . . .		X
<b>b</b> If 4a 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 4b. Also, provide any other additional information. See instructions.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

**Sign Here**  Signature of officer  Date  Title

May the IRS discuss this return with the preparer shown below (see instructions)?  Yes  No

**Paid Preparer Use Only**

Print/Type preparer's name MICHELLE L WEBER	Preparer's signature <i>Michelle L Weber</i>	Date 11/9/2021	Check <input type="checkbox"/> if self-employed	PTIN P00556798
Firm's name <b>▶ GRANT THORNTON LLP</b>	Firm's EIN <b>▶ 36-6055558</b>		Phone no. <b>414-289-8200</b>	
Firm's address <b>▶ 100 E. WISCONSIN AVE., MILWAUKEE, WI 53202</b>				

FORM 990T - PART I LINE 4 - CHARITABLE CONTRIBUTIONS

UNRELATED TRADE OR BUSINESS INCOME	1,390,891.
TAXABLE INCOME FOR CHARITABLE CONTRIBUTION LIMITATION	1,390,891.
	* 10%
CHARITABLE CONTRIBUTION LIMITATION (10%)	139,089.
CHARITABLE CONTRIBUTION	<u>1,741,439,160.</u>
<u>CHARITABLE CONTRIBUTION DEDUCTION (SMALLER OF THE ABOVE TWO)</u>	<u>139,089.</u>

PART IV STATEMENTS REGARDING CERTAIN ACTIVITIES AND OTHER INFORMATION

NAMES OF FOREIGN COUNTRIES

BRAZIL  
CHILE  
CHINA  
CZECH REPUBLIC  
GREECE  
HUNGARY  
INDIA  
ISRAEL  
JAPAN  
KOREA, REPUBLIC OF (SOUTH)  
LITHUANIA  
MALAYSIA  
MEXICO  
PERU  
POLAND  
QATAR  
TAIWAN  
TURKEY

**SCHEDULE D  
(Form 1120)**

Department of the Treasury  
Internal Revenue Service

**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](http://www.irs.gov/Form1120) for instructions and the latest information.

OMB No. 1545-0123

**2020**

Name: **GORDON E. AND BETTY I. MOORE FOUNDATION** Employer identification number: **94-3397785**

Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? . . . . .  Yes  No  
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 round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>1a</b> 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 . . . . .				
<b>2</b> 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 . . . . .				3,707,828.
<b>4</b> Short-term capital gain from installment sales from Form 6252, line 26 or 37 . . . . .				<b>4</b>
<b>5</b> Short-term capital gain or (loss) from like-kind exchanges from Form 8824 . . . . .				<b>5</b>
<b>6</b> Unused capital loss carryover (attach computation) . . . . .				<b>6</b> ( )
<b>7</b> Net short-term capital gain or (loss). Combine lines 1a through 6 in column h . . . . .				<b>7</b> 3,707,828.

**Part II Long-Term Capital Gains and Losses - Assets 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 round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>8a</b> 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 . . . . .				
<b>8b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked . . . . .				
<b>9</b> Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked . . . . .				
<b>10</b> Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked . . . . .				3,965,593.
<b>11</b> Enter gain from Form 4797, line 7 or 9 . . . . .				<b>11</b> 5,943,361.
<b>12</b> Long-term capital gain from installment sales from Form 6252, line 26 or 37 . . . . .				<b>12</b>
<b>13</b> Long-term capital gain or (loss) from like-kind exchanges from Form 8824 . . . . .				<b>13</b>
<b>14</b> Capital gain distributions (see instructions) . . . . .				<b>14</b>
<b>15</b> Net long-term capital gain or (loss). Combine lines 8a through 14 in column h . . . . .				<b>15</b> 9,908,954.

**Part III Summary of Parts I and II**

<b>16</b> Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) . . . . .	<b>16</b>	3,707,828.
		9,908,954.
<b>17</b> Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7) . . . . .	<b>17</b>	
<b>18</b> Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the applicable line on other returns . . . . .	<b>18</b>	13,616,782.

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

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

**Schedule D (Form 1120) 2020**

# Sales and Other Dispositions of Capital Assets

Department of the Treasury  
Internal Revenue Service

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

Name(s) shown on return <b>GORDON E. AND BETTY I. MOORE FOUNDATION</b>	Social security number or taxpayer identification number <b>94-3397785</b>
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Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

**Part I Short-Term.** Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

**Note:** You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

**You must check Box A, B, or C below. Check only one box.** If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (B) Short-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
- (C) Short-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the <b>Note</b> below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). <b>See the separate instructions.</b>		(h) <b>Gain or (loss).</b> Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	CAPITAL GAIN/LOSS - PARTNERSHIPS							3,707,828.
<b>2 Totals.</b>	Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, <b>line 1b</b> (if <b>Box A</b> above is checked), <b>line 2</b> (if <b>Box B</b> above is checked), or <b>line 3</b> (if <b>Box C</b> above is checked) ▶							3,707,828.

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

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

**Social security number or taxpayer identification number**

GORDON E. AND BETTY I. MOORE FOUNDATION

94-3397785

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

**Part II Long-Term.** Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

**Note:** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

**You must check Box D, E, or F below. Check only one box.** If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D)** Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (E)** Long-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
- (F)** Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the <b>Note</b> below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). <b>See the separate instructions.</b>		(h) <b>Gain or (loss).</b> Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	CAPITAL GAIN/LOSS - PARTNERSHIPS							3,965,593.
<b>2 Totals.</b> Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, <b>line 8b</b> (if <b>Box D</b> above is checked), <b>line 9</b> (if <b>Box E</b> above is checked), or <b>line 10</b> (if <b>Box F</b> above is checked) ►								3,965,593.

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

**Sales of Business Property**  
(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

Department of the Treasury  
Internal Revenue Service

▶ Attach to your tax return.

Attachment  
Sequence No. **27**

▶ Go to [www.irs.gov/Form4797](http://www.irs.gov/Form4797) for instructions and the latest information.

Name(s) shown on return: **GORDON E. AND BETTY I. MOORE FOUNDATION**  
Identifying number: **94-3397785**

**1** Enter the gross proceeds from sales or exchanges reported to you for 2020 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20. See instructions . . . . . **1**

**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.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
	ATTACHMENT 1						5,943,361.

**3** Gain, if any, from Form 4684, line 39 . . . . . **3**

**4** Section 1231 gain from installment sales from Form 6252, line 26 or 37 . . . . . **4**

**5** Section 1231 gain or (loss) from like-kind exchanges from Form 8824 . . . . . **5**

**6** Gain, if any, from line 32, from other than casualty or theft . . . . . **6**

**7** Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows . . . . . **7** 5,943,361.

**Partnerships and S corporations.** Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below.

**Individuals, partners, S corporation shareholders, and all others.** If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.

**8** Nonrecaptured net section 1231 losses from prior years. See instructions . . . . . **8**

**9** Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions . . . . . **9**

**Part II Ordinary Gains and Losses** (see instructions)

**10** Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):

**11** Loss, if any, from line 7 . . . . . **11** ( )

**12** Gain, if any, from line 7 or amount from line 8, if applicable. . . . . **12**

**13** Gain, if any, from line 31 . . . . . **13**

**14** Net gain or (loss) from Form 4684, lines 31 and 38a . . . . . **14**

**15** Ordinary gain from installment sales from Form 6252, line 25 or 36 . . . . . **15**

**16** Ordinary gain or (loss) from like-kind exchanges from Form 8824 . . . . . **16**

**17** Combine lines 10 through 16. . . . . **17**

**18** For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below.

**a** If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions . . . . . **18a**

**b** Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040), Part I, line 4. . . . . **18b**

For Paperwork Reduction Act Notice, see separate instructions. Form **4797** (2020)



**Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255**  
(see instructions)

19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property:		(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)
A			
B			
C			
D			
These columns relate to the properties on lines 19A through 19D. ▶		Property A	Property B
20	Gross sales price (Note: See line 1 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	
<b>25 If section 1245 property:</b>			
a	Depreciation allowed or allowable from line 22 . . . . .	25a	
b	Enter the smaller of line 24 or 25a. . . . .	25b	
<b>26 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	
b	Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions . . . . .	26b	
c	Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e . . . . .	26c	
d	Additional depreciation after 1969 and before 1976 . . . . .	26d	
e	Enter the smaller of line 26c or 26d . . . . .	26e	
f	Section 291 amount (corporations only) . . . . .	26f	
g	Add lines 26b, 26e, and 26f . . . . .	26g	
<b>27 If section 1252 property:</b> Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.			
a	Soil, water, and land clearing expenses . . . . .	27a	
b	Line 27a multiplied by applicable percentage. See instructions . . . . .	27b	
c	Enter the smaller of line 24 or 27b . . . . .	27c	
<b>28 If section 1254 property:</b>			
a	Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions . . . . .	28a	
b	Enter the smaller of line 24 or 28a . . . . .	28b	
<b>29 If section 1255 property:</b>			
a	Applicable percentage of payments excluded from income under section 126. See instructions . . . . .	29a	
b	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

**Part 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	



**SCHEDULE A  
(Form 990-T)**

**Unrelated Business Taxable Income  
From an Unrelated Trade or Business**

OMB No. 1545-0074

**2020**

Department of the Treasury  
Internal Revenue Service

▶ Go to [www.irs.gov/Form990T](http://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).

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

<b>A</b> Name of the organization GORDON E. AND BETTY I. MOORE FOUNDATION	<b>B</b> Employer identification number 94-3397785
<b>C</b> Unrelated business activity code (see instructions) ▶ 520000	<b>D</b> Sequence: 1 of 2

**E** Describe the unrelated trade or business ▶ PARTNERSHIP INVESTMENTS - QPI

<b>Part I</b> Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
<b>1a</b> Gross receipts or sales _____			
<b>b</b> Less returns and allowances _____ <b>c</b> Balance ▶	<b>1c</b>		
<b>2</b> Cost of goods sold (Part III, line 8) . . . . .	<b>2</b>		
<b>3</b> Gross profit. Subtract line 2 from line 1c . . . . .	<b>3</b>		
<b>4a</b> Capital gain net income (attach Sch D (Form 1041 or Form 1120)) (see instructions) . . . . .	<b>4a</b> 11,781,369.		11,781,369.
<b>b</b> Net gain (loss) (Form 4797) (attach Form 4797) (see instructions)	<b>4b</b>		
<b>c</b> Capital loss deduction for trusts . . . . .	<b>4c</b>		
<b>5</b> Income (loss) from a partnership or an S corporation (attach statement) . . . . . <u>ATCH 3</u>	<b>5</b> -5,757,299.		-5,757,299.
<b>6</b> Rent income (Part IV) . . . . .	<b>6</b>		
<b>7</b> Unrelated debt-financed income (Part V) . . . . .	<b>7</b>		
<b>8</b> Interest, annuities, royalties, and rents from a controlled organization (Part VI) . . . . .	<b>8</b>		
<b>9</b> Investment income of section 501(c)(7), (9), or (17) organizations (Part VII) . . . . .	<b>9</b>		
<b>10</b> Exploited exempt activity income (Part VIII) . . . . .	<b>10</b>		
<b>11</b> Advertising income (Part IX) . . . . .	<b>11</b>		
<b>12</b> Other income (see instructions; attach statement) . . . . .	<b>12</b>		
<b>13 Total.</b> Combine lines 3 through 12 . . . . .	<b>13</b> 6,024,070.		6,024,070.

<b>Part II</b> Deductions Not Taken Elsewhere (See instructions for limitations on deductions) Deductions must be directly connected with the unrelated business income		(A) Income		(B) Expenses	(C) Net
<b>1</b> Compensation of officers, directors, and trustees (Part X) . . . . .	<b>1</b>				168,830.
<b>2</b> Salaries and wages . . . . .	<b>2</b>				32,157.
<b>3</b> Repairs and maintenance . . . . .	<b>3</b>				
<b>4</b> Bad debts. . . . .	<b>4</b>				
<b>5</b> Interest (attach statement) (see instructions) . . . . .	<b>5</b>				
<b>6</b> Taxes and licenses . . . . .	<b>6</b>				365,634.
<b>7</b> Depreciation (attach Form 4562) (see instructions) . . . . .	<b>7</b>				
<b>8</b> Less depreciation claimed in Part III and elsewhere on return . . . . .	<b>8a</b>				
<b>9</b> Depletion . . . . .	<b>9</b>				5,415,955.
<b>10</b> Contributions to deferred compensation plans . . . . .	<b>10</b>				
<b>11</b> Employee benefit programs . . . . .	<b>11</b>				
<b>12</b> Excess exempt expenses (Part VIII) . . . . .	<b>12</b>				
<b>13</b> Excess readership costs (Part IX) . . . . .	<b>13</b>				
<b>14</b> Other deductions (attach statement) . . . . . <u>ATCH 4</u>	<b>14</b>				102,512.
<b>15 Total deductions.</b> Add lines 1 through 14 . . . . .	<b>15</b>				6,085,088.
<b>16</b> Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C) . . . . .	<b>16</b>				-61,018.
<b>17</b> Deduction for net operating loss (see instructions) . . . . .	<b>17</b>				
<b>18 Unrelated business taxable income.</b> Subtract line 17 from line 16. . . . .	<b>18</b>				-61,018.

For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2020

Part III Cost of Goods Sold

Enter method of inventory valuation

Table with 8 rows for Cost of Goods Sold: 1 Inventory at beginning of year, 2 Purchases, 3 Cost of labor, 4 Additional section 263A costs, 5 Other costs, 6 Total, 7 Inventory at end of year, 8 Cost of goods sold.

9 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? Yes No

Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)

Table with 1 row for Description of property (property street address, city, state, ZIP code). Check if a dual-use (see instructions). Columns A, B, C, D.

Table with 2 rows for Rent received or accrued. Row 2a: From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%). Row 2b: From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income). Row 2c: Total rents received or accrued by property. Add lines 2a and 2b, columns A through D.

3 Total rents received or accrued. Add line 2c columns A through D. Enter here and on Part I, line 6, column (A)

Table with 1 row for Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement). Columns A, B, C, D.

5 Total deductions. Add line 4 columns A through D. Enter here and on Part I, line 6, column (B)

Part V Unrelated Debt-Financed Income (see instructions)

Table with 1 row for Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use (see instructions). Columns A, B, C, D.

Table with 7 rows for Unrelated Debt-Financed Income: 2 Gross income from or allocable to debt-financed property, 3 Deductions directly connected with or allocable to debt-financed property (3a Straight line depreciation, 3b Other deductions, 3c Total deductions), 4 Amount of average acquisition debt on or allocable to debt-financed property, 5 Average adjusted basis of or allocable to debt-financed property, 6 Divide line 4 by line 5, 7 Gross income reportable. Multiply line 2 by line 6.

8 Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A)

9 Allocable deductions. Multiply line 3c by line 6

10 Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)

11 Total dividends-received deductions included in line 10.

**Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations** (see instructions)

Exempt Controlled Organizations					
1. Name of controlled organization	2. Employer identification number	3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations				
7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
<b>Totals</b> .....			Add columns 5 and 10. Enter here and on Part I, line 8, column (A)	Add columns 6 and 11. Enter here and on Part I, line 8, column (B)

**Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization** (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add columns 3 and 4)
(1)				
(2)				
(3)				
(4)				
<b>Totals</b> .....		Add amounts in column 2. Enter here and on Part I, line 9, column (A)		Add amounts in column 5. Enter here and on Part I, line 9, column (B)

**Part VIII Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1 Description of exploited activity: _____	
2 Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A)	<b>2</b>
3 Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B) .....	<b>3</b>
4 Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7 .....	<b>4</b>
5 Gross income from activity that is not unrelated business income .....	<b>5</b>
6 Expenses attributable to income entered on line 5 .....	<b>6</b>
7 Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12 .....	<b>7</b>

**Part IX Advertising Income**

1 Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis.

A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
D	<input type="checkbox"/>

_____
_____
_____
_____

Enter amounts for each periodical listed above in the corresponding column.

	A	B	C	D
2 Gross advertising income . . . . .				

a Add columns A through D. Enter here and on Part I, line 11, column (A), . . . . . ▶ \_\_\_\_\_

3 Direct advertising costs by periodical . . . . .				
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a Add columns A through D. Enter here and on Part I, line 11, column (B), . . . . . ▶ \_\_\_\_\_

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 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 . . . . .				

a Add line 8, columns A through D. Enter the greater of the line 8a, columns total or zero here and on Part II, line 13 . . . . . ▶ \_\_\_\_\_

**Part X Compensation of Officers, Directors, and Trustees** (see instructions)

1. Name	2. Title	3. Percentage of time devoted to business	4. Compensation attributable to unrelated business
(1) DENISE STRACK	CHIEF INVESTMENT OFFICER	5.0000%	168,830.
(2)		%	
(3)		%	
(4)		%	

**Total.** Enter here and on Part II, line 1. . . . . ▶ 168,830.

**Part XI Supplemental Information** (see instructions)

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## PARTNERSHIP INVESTMENTS - QPI

PART I LINE 5 - INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS

	SHARE OF GROSS INCOME	SHARE OF DEDUCTIONS	GAIN OR (LOSS)
INCOME FROM PSHIP INVESTMENTS - QPI	-5,757,299.		-5,757,299.
INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS			<u>-5,757,299.</u>

PARTNERSHIP INVESTMENTS - QPI

SCHEDULE A - PART II: OTHER DEDUCTIONS DETAIL

LEGAL FEES	373.
ACCOUNTING FEES	67,500.
OTHER PROFESSIONAL SERVICE FEES	30,771.
OCCUPANCY RELATED EXPENSES	1,800.
TRAVEL, CONFERENCES, AND MEETINGS	235.
PRINTING AND PUBLICATIONS	2.
GENERAL EXPENSES	1,831.
TOTAL OTHER DEDUCTIONS .....	<u>102,512.</u>





**SCHEDULE A  
(Form 990-T)**

**Unrelated Business Taxable Income  
From an Unrelated Trade or Business**

OMB No. 1545-0074

**2020**

Department of the Treasury  
Internal Revenue Service

▶ Go to [www.irs.gov/Form990T](http://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).

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

<b>A</b> Name of the organization GORDON E. AND BETTY I. MOORE FOUNDATION	<b>B</b> Employer identification number 94-3397785
<b>C</b> Unrelated business activity code (see instructions) ▶ 520000	<b>D</b> Sequence: 2 of 2

**E** Describe the unrelated trade or business ▶ PARTNERSHIP INVESTMENT #1

<b>Part I</b> Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
<b>1a</b> Gross receipts or sales _____				
<b>b</b> Less returns and allowances _____ <b>c</b> Balance ▶	<b>1c</b>			
<b>2</b> Cost of goods sold (Part III, line 8) . . . . .	<b>2</b>			
<b>3</b> Gross profit. Subtract line 2 from line 1c . . . . .	<b>3</b>			
<b>4a</b> Capital gain net income (attach Sch D (Form 1041 or Form 1120)) (see instructions) . . . . .	<b>4a</b>	1,835,413.		1,835,413.
<b>b</b> Net gain (loss) (Form 4797) (attach Form 4797) (see instructions)	<b>4b</b>			
<b>c</b> Capital loss deduction for trusts . . . . .	<b>4c</b>			
<b>5</b> Income (loss) from a partnership or an S corporation (attach statement) . . . . . <u>ATCH 5</u>	<b>5</b>	-444,522.		-444,522.
<b>6</b> Rent income (Part IV) . . . . .	<b>6</b>			
<b>7</b> Unrelated debt-financed income (Part V) . . . . .	<b>7</b>			
<b>8</b> Interest, annuities, royalties, and rents from a controlled organization (Part VI) . . . . .	<b>8</b>			
<b>9</b> Investment income of section 501(c)(7), (9), or (17) organizations (Part VII) . . . . .	<b>9</b>			
<b>10</b> Exploited exempt activity income (Part VIII) . . . . .	<b>10</b>			
<b>11</b> Advertising income (Part IX) . . . . .	<b>11</b>			
<b>12</b> Other income (see instructions; attach statement) . . . . .	<b>12</b>			
<b>13</b> <b>Total.</b> Combine lines 3 through 12 . . . . .	<b>13</b>	1,390,891.		1,390,891.

<b>Part II</b> Deductions Not Taken Elsewhere (See instructions for limitations on deductions) Deductions must be directly connected with the unrelated business income			(A) Income	(B) Expenses	(C) Net
<b>1</b> Compensation of officers, directors, and trustees (Part X) . . . . .	<b>1</b>				
<b>2</b> Salaries and wages . . . . .	<b>2</b>				
<b>3</b> Repairs and maintenance . . . . .	<b>3</b>				
<b>4</b> Bad debts. . . . .	<b>4</b>				
<b>5</b> Interest (attach statement) (see instructions) . . . . .	<b>5</b>				
<b>6</b> Taxes and licenses . . . . .	<b>6</b>				
<b>7</b> Depreciation (attach Form 4562) (see instructions) . . . . .	<b>7</b>				
<b>8</b> Less depreciation claimed in Part III and elsewhere on return . . . . .	<b>8a</b>				
<b>9</b> Depletion . . . . .	<b>9</b>				
<b>10</b> Contributions to deferred compensation plans . . . . .	<b>10</b>				
<b>11</b> Employee benefit programs . . . . .	<b>11</b>				
<b>12</b> Excess exempt expenses (Part VIII) . . . . .	<b>12</b>				
<b>13</b> Excess readership costs (Part IX) . . . . .	<b>13</b>				
<b>14</b> Other deductions (attach statement) . . . . .	<b>14</b>				
<b>15</b> <b>Total deductions.</b> Add lines 1 through 14 . . . . .	<b>15</b>				
<b>16</b> Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C) . . . . .	<b>16</b>				1,390,891.
<b>17</b> Deduction for net operating loss (see instructions) . . . . .	<b>17</b>				
<b>18</b> <b>Unrelated business taxable income.</b> Subtract line 17 from line 16. . . . .	<b>18</b>				1,390,891.

For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2020

Part III Cost of Goods Sold

Enter method of inventory valuation

Table with 8 rows for Cost of Goods Sold: 1 Inventory at beginning of year, 2 Purchases, 3 Cost of labor, 4 Additional section 263A costs, 5 Other costs, 6 Total, 7 Inventory at end of year, 8 Cost of goods sold.

9 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? Yes No

Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)

Table with 1 row for Description of property (property street address, city, state, ZIP code). Check if a dual-use (see instructions). Columns A, B, C, D.

Table with 2 rows for Rent received or accrued. Row 2a: From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%). Row 2b: From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income). Row 2c: Total rents received or accrued by property. Add lines 2a and 2b, columns A through D.

3 Total rents received or accrued. Add line 2c columns A through D. Enter here and on Part I, line 6, column (A)

Table with 1 row for Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement). Columns A, B, C, D.

5 Total deductions. Add line 4 columns A through D. Enter here and on Part I, line 6, column (B)

Part V Unrelated Debt-Financed Income (see instructions)

Table with 1 row for Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use (see instructions). Columns A, B, C, D.

Table with 8 rows for Unrelated Debt-Financed Income: 2 Gross income from or allocable to debt-financed property, 3 Deductions directly connected with or allocable to debt-financed property (3a Straight line depreciation, 3b Other deductions, 3c Total deductions), 4 Amount of average acquisition debt on or allocable to debt-financed property, 5 Average adjusted basis of or allocable to debt-financed property, 6 Divide line 4 by line 5, 7 Gross income reportable. Multiply line 2 by line 6, 8 Total gross income.

9 Allocable deductions. Multiply line 3c by line 6

10 Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)

11 Total dividends-received deductions included in line 10.

**Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations** (see instructions)

Exempt Controlled Organizations					
1. Name of controlled organization	2. Employer identification number	3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					
Nonexempt Controlled Organizations					
7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10	
(1)					
(2)					
(3)					
(4)					
				Add columns 5 and 10. Enter here and on Part I, line 8, column (A)	Add columns 6 and 11. Enter here and on Part I, line 8, column (B)
<b>Totals</b> .....					

**Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization** (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add columns 3 and 4)
(1)				
(2)				
(3)				
(4)				
		Add amounts in column 2. Enter here and on Part I, line 9, column (A)		Add amounts in column 5. Enter here and on Part I, line 9, column (B)
<b>Totals</b> .....				

**Part VIII Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1 Description of exploited activity: _____	
2 Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A)	<b>2</b>
3 Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B) .....	<b>3</b>
4 Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7 .....	<b>4</b>
5 Gross income from activity that is not unrelated business income .....	<b>5</b>
6 Expenses attributable to income entered on line 5 .....	<b>6</b>
7 Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12 .....	<b>7</b>

**Part IX Advertising Income**

1 Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis.

A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
D	<input type="checkbox"/>

_____
_____
_____
_____

Enter amounts for each periodical listed above in the corresponding column.

	A	B	C	D
2 Gross advertising income . . . . .				

a Add columns A through D. Enter here and on Part I, line 11, column (A), . . . . . ▶ \_\_\_\_\_

3 Direct advertising costs by periodical . . . . .				
--	--	--	--	--

a Add columns A through D. Enter here and on Part I, line 11, column (B), . . . . . ▶ \_\_\_\_\_

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 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 . . . . .				

a Add line 8, columns A through D. Enter the greater of the line 8a, columns total or zero here and on Part II, line 13 . . . . . ▶ \_\_\_\_\_

**Part X Compensation of Officers, Directors, and Trustees** (see instructions)

1. Name	2. Title	3. Percentage of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	

**Total.** Enter here and on Part II, line 1 . . . . . ▶ \_\_\_\_\_

**Part XI Supplemental Information** (see instructions)

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PARTNERSHIP INVESTMENT #1

PART I LINE 5 - INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS

	SHARE OF GROSS INCOME	SHARE OF DEDUCTIONS	GAIN OR (LOSS)
ORDINARY INCOME - PSHIP INVEST #1	-444,522.		-444,522.
INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS			<u>-444,522.</u>

Department of the Treasury  
Internal Revenue Service (99)

▶ Go to [www.irs.gov/Form3800](http://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.

**2020**  
Attachment  
Sequence No. **22**

Name(s) shown on return

GORDON E. AND BETTY I. MOORE FOUNDATION

Identifying number

94-3397785

**Part I Current Year Credit for Credits Not Allowed Against Tentative Minimum Tax (TMT)**  
(See instructions and complete Part(s) III before Parts I and II.)

<b>1</b>	General business credit from line 2 of all Parts III with box A checked . . . . .	<b>1</b>	50,001
<b>2</b>	Passive activity credits from line 2 of all Parts III with box B checked . . . . .	<b>2</b>	
<b>3</b>	Enter the applicable passive activity credits allowed for 2020. See instructions . . . . .	<b>3</b>	
<b>4</b>	Carryforward of general business credit to 2020. Enter the amount from line 2 of Part III with box C checked. See instructions for statement to attach . . . . .	<b>4</b>	619,797
	Check this box if the carryforward was changed or revised from the original reported amount . . . . .		<input type="checkbox"/>
<b>5</b>	Carryback of general business credit from 2021. Enter the amount from line 2 of Part III with box D checked. See instructions . . . . .	<b>5</b>	
<b>6</b>	Add lines 1, 3, 4, and 5 . . . . .	<b>6</b>	669,798

**Part II Allowable Credit**

<b>7</b>	Regular tax before credits:		
	• 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 applicable line of your return . . . . .		
	• Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G, lines 1a and 1b; or the amount from the applicable line of your return . . . . .		
<b>8</b>	Alternative minimum tax:		
	• Individuals. Enter the amount from Form 6251, line 11 . . . . .	}	
	• Corporations. Enter -0- . . . . .		
	• Estates and trusts. Enter the amount from Schedule I (Form 1041), line 54 . . . . .		
<b>9</b>	Add lines 7 and 8 . . . . .	<b>9</b>	262,668
<b>10a</b>	Foreign tax credit . . . . .	<b>10a</b>	
<b>b</b>	Certain allowable credits (see instructions) . . . . .	<b>10b</b>	
<b>c</b>	Add lines 10a and 10b . . . . .	<b>10c</b>	0
<b>11</b>	<b>Net income tax.</b> Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on line 16 . . . . .	<b>11</b>	262,668
<b>12</b>	<b>Net regular tax.</b> Subtract line 10c from line 7. If zero or less, enter -0- . . . . .	<b>12</b>	262,668
<b>13</b>	Enter 25% (0.25) of the excess, if any, of line 12 over \$25,000. See instructions . . . . .	<b>13</b>	59,417
<b>14</b>	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 . . . . .		
<b>15</b>	Enter the greater of line 13 or line 14 . . . . .	<b>15</b>	59,417
<b>16</b>	Subtract line 15 from line 11. If zero or less, enter -0- . . . . .	<b>16</b>	203,251
<b>17</b>	Enter the <b>smaller</b> of line 6 or line 16 . . . . .	<b>17</b>	203,251
	<b>C corporations:</b> See the line 17 instructions if there has been an ownership change, acquisition, or reorganization.		NONE

For Paperwork Reduction Act Notice, see separate instructions.

**Part II Allowable Credit** *(continued)*

**Note:** 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 26.

<b>18</b>	Multiply line 14 by 75% (0.75). See instructions . . . . .	<b>18</b>	0
<b>19</b>	Enter the greater of line 13 or line 18 . . . . .	<b>19</b>	59,417
<b>20</b>	Subtract line 19 from line 11. If zero or less, enter -0- . . . . .	<b>20</b>	203,251
<b>21</b>	Subtract line 17 from line 20. If zero or less, enter -0- . . . . .	<b>21</b>	0
<b>22</b>	Combine the amounts from line 3 of all Parts III with box A, C, or D checked . . . . .	<b>22</b>	0
<b>23</b>	Passive activity credit from line 3 of all Parts III with box B checked . . . . .	<b>23</b>	0
<b>24</b>	Enter the applicable passive activity credit allowed for 2020. See instructions . . . . .	<b>24</b>	0
<b>25</b>	Add lines 22 and 24 . . . . .	<b>25</b>	0
<b>26</b>	Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25 . . . . .	<b>26</b>	0
<b>27</b>	Subtract line 13 from line 11. If zero or less, enter -0- . . . . .	<b>27</b>	203,251
<b>28</b>	Add lines 17 and 26 . . . . .	<b>28</b>	203,251
<b>29</b>	Subtract line 28 from line 27. If zero or less, enter -0- . . . . .	<b>29</b>	0
<b>30</b>	Enter the general business credit from line 5 of all Parts III with box A checked . . . . .	<b>30</b>	34,578
<b>31</b>	Reserved . . . . .	<b>31</b>	
<b>32</b>	Passive activity credits from line 5 of all Parts III with box B checked . . . . .	<b>32</b>	0
<b>33</b>	Enter the applicable passive activity credits allowed for 2020. See instructions . . . . .	<b>33</b>	
<b>34</b>	Carryforward of business credit to 2020. 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 . . . . .	<b>34</b>	295,816 <input type="checkbox"/>
<b>35</b>	Carryback of business credit from 2021. Enter the amount from line 5 of Part III with box D checked. See instructions . . . . .	<b>35</b>	0
<b>36</b>	Add lines 30, 33, 34, and 35 . . . . .	<b>36</b>	330,394
<b>37</b>	Enter the <b>smaller</b> of line 29 or line 36 . . . . .	<b>37</b>	0
<b>38</b>	<b>Credit allowed for the current year.</b> 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 . . . . . }	<b>38</b>	203,251



Name(s) shown on return

Identifying number

GORDON E. AND BETTY I. MOORE FOUNDATION

94-3397785

**Part III General Business Credits or Eligible Small Business Credits** (see instructions)

Complete a separate Part III for each box checked below. See instructions.

- A**  General Business Credit From a Non-Passive Activity      **E**  Reserved
- B**  General Business Credit From a Passive Activity      **F**  Reserved
- C**  General Business Credit Carryforwards      **G**  Eligible Small Business Credit Carryforwards
- D**  General Business Credit Carrybacks      **H**  Reserved

**I** If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III.

(a) Description of credit	(b) Enter EIN if claiming the credit from a pass-through entity.	(c) Enter the appropriate amount.	
<b>Note:</b> On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity.			
<b>1a</b> Investment (Form 3468, Part II only) (attach Form 3468)	<b>1a</b>		
<b>b</b> Reserved	<b>1b</b>		
<b>c</b> Increasing research activities (Form 6765)	<b>1c</b>	49,598	
<b>d</b> Low-income housing (Form 8586, Part I only)	<b>1d</b>	403	
<b>e</b> Disabled access (Form 8826)*	<b>1e</b>		
<b>f</b> Renewable electricity, refined coal, and Indian coal production (Form 8835)	<b>1f</b>		
<b>g</b> Indian employment (Form 8845)	<b>1g</b>		
<b>h</b> Orphan drug (Form 8820)	<b>1h</b>		
<b>i</b> New markets (Form 8874)	<b>1i</b>		
<b>j</b> Small employer pension plan startup costs and auto-enrollment (Form 8881)	<b>1j</b>		
<b>k</b> Employer-provided child care facilities and services (Form 8882)*	<b>1k</b>		
<b>l</b> Biodiesel and renewable diesel fuels (attach Form 8864)	<b>1l</b>		
<b>m</b> Low sulfur diesel fuel production (Form 8896)	<b>1m</b>		
<b>n</b> Distilled spirits (Form 8906)	<b>1n</b>		
<b>o</b> Nonconventional source fuel (carryforward only)	<b>1o</b>		
<b>p</b> Energy efficient home (Form 8908)	<b>1p</b>		
<b>q</b> Energy efficient appliance (carryforward only)	<b>1q</b>		
<b>r</b> Alternative motor vehicle (Form 8910)	<b>1r</b>		
<b>s</b> Alternative fuel vehicle refueling property (Form 8911)	<b>1s</b>		
<b>t</b> Enhanced oil recovery credit (carryforward only)	<b>1t</b>		
<b>u</b> Mine rescue team training (Form 8923)	<b>1u</b>		
<b>v</b> Agricultural chemicals security (carryforward only)	<b>1v</b>		
<b>w</b> Employer differential wage payments (Form 8932)	<b>1w</b>		
<b>x</b> Carbon oxide sequestration (Form 8933)	<b>1x</b>		
<b>y</b> Qualified plug-in electric drive motor vehicle (Form 8936)	<b>1y</b>		
<b>z</b> Qualified plug-in electric vehicle (carryforward only)	<b>1z</b>		
<b>aa</b> Employee retention (Form 5884-A)	<b>1aa</b>		
<b>bb</b> General credits from an electing large partnership (carryforward only)	<b>1bb</b>		
<b>zz</b> Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions)	<b>1zz</b>		
<b>2</b> Add lines 1a through 1zz and enter here and on the applicable line of Part I	<b>2</b>	50,001	
<b>3</b> Enter the amount from Form 8844 here and on the applicable line of Part II	<b>3</b>		
<b>4a</b> Investment (Form 3468, Part III) (attach Form 3468)	<b>4a</b>		
<b>b</b> Work opportunity (Form 5884)	<b>4b</b>		
<b>c</b> Biofuel producer (Form 6478)	<b>4c</b>		
<b>d</b> Low-income housing (Form 8586, Part II)	<b>4d</b>		
<b>e</b> Renewable electricity, refined coal, and Indian coal production (Form 8835)	<b>4e</b>		
<b>f</b> Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	<b>4f</b>	34,578	
<b>g</b> Qualified railroad track maintenance (Form 8900)	<b>4g</b>		
<b>h</b> Small employer health insurance premiums (Form 8941)	<b>4h</b>		
<b>i</b> Increasing research activities (Form 6765)	<b>4i</b>		
<b>j</b> Employer credit for paid family and medical leave (Form 8994)	<b>4j</b>		
<b>z</b> Other	<b>4z</b>		
<b>5</b> Add lines 4a through 4z and enter here and on the applicable line of Part II	<b>5</b>	34,578	
<b>6</b> Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	<b>6</b>	84,579	

\* See instructions for limitation on this credit.

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GORDON E. AND BETTY I. MOORE FOUNDATION

94-3397785

**Part III General Business Credits or Eligible Small Business Credits** (see instructions)

Complete a separate Part III for each box checked below. See instructions.

- A**  General Business Credit From a Non-Passive Activity      **E**  Reserved
- B**  General Business Credit From a Passive Activity      **F**  Reserved
- C**  General Business Credit Carryforwards      **G**  Eligible Small Business Credit Carryforwards
- D**  General Business Credit Carrybacks      **H**  Reserved

**I** If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III.

		(b) Enter EIN if claiming the credit from a pass-through entity.	(c) Enter the appropriate amount.
<b>Note:</b> On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity.			
<b>(a) Description of credit</b>			
<b>1a</b> Investment (Form 3468, Part II only) (attach Form 3468)	<b>1a</b>		
<b>b</b> Reserved	<b>1b</b>		
<b>c</b> Increasing research activities (Form 6765)	<b>1c</b>	83-0811600	1,252
<b>d</b> Low-income housing (Form 8586, Part I only)	<b>1d</b>	04-3455023	292
<b>e</b> Disabled access (Form 8826)*	<b>1e</b>		
<b>f</b> Renewable electricity, refined coal, and Indian coal production (Form 8835)	<b>1f</b>		
<b>g</b> Indian employment (Form 8845)	<b>1g</b>		
<b>h</b> Orphan drug (Form 8820)	<b>1h</b>		
<b>i</b> New markets (Form 8874)	<b>1i</b>		
<b>j</b> Small employer pension plan startup costs and auto-enrollment (Form 8881)	<b>1j</b>		
<b>k</b> Employer-provided child care facilities and services (Form 8882)*	<b>1k</b>		
<b>l</b> Biodiesel and renewable diesel fuels (attach Form 8864)	<b>1l</b>		
<b>m</b> Low sulfur diesel fuel production (Form 8896)	<b>1m</b>		
<b>n</b> Distilled spirits (Form 8906)	<b>1n</b>		
<b>o</b> Nonconventional source fuel (carryforward only)	<b>1o</b>		
<b>p</b> Energy efficient home (Form 8908)	<b>1p</b>		
<b>q</b> Energy efficient appliance (carryforward only)	<b>1q</b>		
<b>r</b> Alternative motor vehicle (Form 8910)	<b>1r</b>		
<b>s</b> Alternative fuel vehicle refueling property (Form 8911)	<b>1s</b>		
<b>t</b> Enhanced oil recovery credit (carryforward only)	<b>1t</b>		
<b>u</b> Mine rescue team training (Form 8923)	<b>1u</b>		
<b>v</b> Agricultural chemicals security (carryforward only)	<b>1v</b>		
<b>w</b> Employer differential wage payments (Form 8932)	<b>1w</b>		
<b>x</b> Carbon oxide sequestration (Form 8933)	<b>1x</b>		
<b>y</b> Qualified plug-in electric drive motor vehicle (Form 8936)	<b>1y</b>		
<b>z</b> Qualified plug-in electric vehicle (carryforward only)	<b>1z</b>		
<b>aa</b> Employee retention (Form 5884-A)	<b>1aa</b>		
<b>bb</b> General credits from an electing large partnership (carryforward only)	<b>1bb</b>		
<b>zz</b> Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions)	<b>1zz</b>		
<b>2</b> Add lines 1a through 1zz and enter here and on the applicable line of Part I	<b>2</b>		1,544
<b>3</b> Enter the amount from Form 8844 here and on the applicable line of Part II	<b>3</b>		
<b>4a</b> Investment (Form 3468, Part III) (attach Form 3468)	<b>4a</b>		
<b>b</b> Work opportunity (Form 5884)	<b>4b</b>		
<b>c</b> Biofuel producer (Form 6478)	<b>4c</b>		
<b>d</b> Low-income housing (Form 8586, Part II)	<b>4d</b>		
<b>e</b> Renewable electricity, refined coal, and Indian coal production (Form 8835)	<b>4e</b>		
<b>f</b> Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	<b>4f</b>	04-3455023	1
<b>g</b> Qualified railroad track maintenance (Form 8900)	<b>4g</b>		
<b>h</b> Small employer health insurance premiums (Form 8941)	<b>4h</b>		
<b>i</b> Increasing research activities (Form 6765)	<b>4i</b>		
<b>j</b> Employer credit for paid family and medical leave (Form 8994)	<b>4j</b>		
<b>z</b> Other	<b>4z</b>		
<b>5</b> Add lines 4a through 4z and enter here and on the applicable line of Part II	<b>5</b>		1
<b>6</b> Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	<b>6</b>		1,545

\* See instructions for limitation on this credit.

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GORDON E. AND BETTY I. MOORE FOUNDATION

94-3397785

**Part III General Business Credits or Eligible Small Business Credits** (see instructions)

Complete a separate Part III for each box checked below. See instructions.

- A**  General Business Credit From a Non-Passive Activity      **E**  Reserved
- B**  General Business Credit From a Passive Activity      **F**  Reserved
- C**  General Business Credit Carryforwards      **G**  Eligible Small Business Credit Carryforwards
- D**  General Business Credit Carrybacks      **H**  Reserved

**I** If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III.

		(b) Enter EIN if claiming the credit from a pass-through entity.	(c) Enter the appropriate amount.
<b>(a) Description of credit</b>			
<b>Note:</b> On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity.			
<b>1a</b> Investment (Form 3468, Part II only) (attach Form 3468)	<b>1a</b>		
<b>b</b> Reserved	<b>1b</b>		
<b>c</b> Increasing research activities (Form 6765)	<b>1c</b>	98-1087032	994
<b>d</b> Low-income housing (Form 8586, Part I only)	<b>1d</b>	36-4804829	111
<b>e</b> Disabled access (Form 8826)*	<b>1e</b>		
<b>f</b> Renewable electricity, refined coal, and Indian coal production (Form 8835)	<b>1f</b>		
<b>g</b> Indian employment (Form 8845)	<b>1g</b>		
<b>h</b> Orphan drug (Form 8820)	<b>1h</b>		
<b>i</b> New markets (Form 8874)	<b>1i</b>		
<b>j</b> Small employer pension plan startup costs and auto-enrollment (Form 8881)	<b>1j</b>		
<b>k</b> Employer-provided child care facilities and services (Form 8882)*	<b>1k</b>		
<b>l</b> Biodiesel and renewable diesel fuels (attach Form 8864)	<b>1l</b>		
<b>m</b> Low sulfur diesel fuel production (Form 8896)	<b>1m</b>		
<b>n</b> Distilled spirits (Form 8906)	<b>1n</b>		
<b>o</b> Nonconventional source fuel (carryforward only)	<b>1o</b>		
<b>p</b> Energy efficient home (Form 8908)	<b>1p</b>		
<b>q</b> Energy efficient appliance (carryforward only)	<b>1q</b>		
<b>r</b> Alternative motor vehicle (Form 8910)	<b>1r</b>		
<b>s</b> Alternative fuel vehicle refueling property (Form 8911)	<b>1s</b>		
<b>t</b> Enhanced oil recovery credit (carryforward only)	<b>1t</b>		
<b>u</b> Mine rescue team training (Form 8923)	<b>1u</b>		
<b>v</b> Agricultural chemicals security (carryforward only)	<b>1v</b>		
<b>w</b> Employer differential wage payments (Form 8932)	<b>1w</b>		
<b>x</b> Carbon oxide sequestration (Form 8933)	<b>1x</b>		
<b>y</b> Qualified plug-in electric drive motor vehicle (Form 8936)	<b>1y</b>		
<b>z</b> Qualified plug-in electric vehicle (carryforward only)	<b>1z</b>		
<b>aa</b> Employee retention (Form 5884-A)	<b>1aa</b>		
<b>bb</b> General credits from an electing large partnership (carryforward only)	<b>1bb</b>		
<b>zz</b> Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions)	<b>1zz</b>		
<b>2</b> Add lines 1a through 1zz and enter here and on the applicable line of Part I	<b>2</b>		1,105
<b>3</b> Enter the amount from Form 8844 here and on the applicable line of Part II	<b>3</b>		
<b>4a</b> Investment (Form 3468, Part III) (attach Form 3468)	<b>4a</b>		
<b>b</b> Work opportunity (Form 5884)	<b>4b</b>		
<b>c</b> Biofuel producer (Form 6478)	<b>4c</b>		
<b>d</b> Low-income housing (Form 8586, Part II)	<b>4d</b>		
<b>e</b> Renewable electricity, refined coal, and Indian coal production (Form 8835)	<b>4e</b>		
<b>f</b> Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	<b>4f</b>	04-3514360	7
<b>g</b> Qualified railroad track maintenance (Form 8900)	<b>4g</b>		
<b>h</b> Small employer health insurance premiums (Form 8941)	<b>4h</b>		
<b>i</b> Increasing research activities (Form 6765)	<b>4i</b>		
<b>j</b> Employer credit for paid family and medical leave (Form 8994)	<b>4j</b>		
<b>z</b> Other	<b>4z</b>		
<b>5</b> Add lines 4a through 4z and enter here and on the applicable line of Part II	<b>5</b>		7
<b>6</b> Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	<b>6</b>		1,112

\* See instructions for limitation on this credit.

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GORDON E. AND BETTY I. MOORE FOUNDATION

94-3397785

**Part III General Business Credits or Eligible Small Business Credits** (see instructions)

Complete a separate Part III for each box checked below. See instructions.

- A**  General Business Credit From a Non-Passive Activity      **E**  Reserved
- B**  General Business Credit From a Passive Activity      **F**  Reserved
- C**  General Business Credit Carryforwards      **G**  Eligible Small Business Credit Carryforwards
- D**  General Business Credit Carrybacks      **H**  Reserved

**I** If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III.

		(b) Enter EIN if claiming the credit from a pass-through entity.	(c) Enter the appropriate amount.
<b>Note:</b> On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity.			
<b>(a) Description of credit</b>			
<b>1a</b> Investment (Form 3468, Part II only) (attach Form 3468)	<b>1a</b>		
<b>b</b> Reserved	<b>1b</b>		
<b>c</b> Increasing research activities (Form 6765)	<b>1c</b>	37-1875850	367
<b>d</b> Low-income housing (Form 8586, Part I only)	<b>1d</b>		
<b>e</b> Disabled access (Form 8826)*	<b>1e</b>		
<b>f</b> Renewable electricity, refined coal, and Indian coal production (Form 8835)	<b>1f</b>		
<b>g</b> Indian employment (Form 8845)	<b>1g</b>		
<b>h</b> Orphan drug (Form 8820)	<b>1h</b>		
<b>i</b> New markets (Form 8874)	<b>1i</b>		
<b>j</b> Small employer pension plan startup costs and auto-enrollment (Form 8881)	<b>1j</b>		
<b>k</b> Employer-provided child care facilities and services (Form 8882)*	<b>1k</b>		
<b>l</b> Biodiesel and renewable diesel fuels (attach Form 8864)	<b>1l</b>		
<b>m</b> Low sulfur diesel fuel production (Form 8896)	<b>1m</b>		
<b>n</b> Distilled spirits (Form 8906)	<b>1n</b>		
<b>o</b> Nonconventional source fuel (carryforward only)	<b>1o</b>		
<b>p</b> Energy efficient home (Form 8908)	<b>1p</b>		
<b>q</b> Energy efficient appliance (carryforward only)	<b>1q</b>		
<b>r</b> Alternative motor vehicle (Form 8910)	<b>1r</b>		
<b>s</b> Alternative fuel vehicle refueling property (Form 8911)	<b>1s</b>		
<b>t</b> Enhanced oil recovery credit (carryforward only)	<b>1t</b>		
<b>u</b> Mine rescue team training (Form 8923)	<b>1u</b>		
<b>v</b> Agricultural chemicals security (carryforward only)	<b>1v</b>		
<b>w</b> Employer differential wage payments (Form 8932)	<b>1w</b>		
<b>x</b> Carbon oxide sequestration (Form 8933)	<b>1x</b>		
<b>y</b> Qualified plug-in electric drive motor vehicle (Form 8936)	<b>1y</b>		
<b>z</b> Qualified plug-in electric vehicle (carryforward only)	<b>1z</b>		
<b>aa</b> Employee retention (Form 5884-A)	<b>1aa</b>		
<b>bb</b> General credits from an electing large partnership (carryforward only)	<b>1bb</b>		
<b>zz</b> Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions)	<b>1zz</b>		
<b>2</b> Add lines 1a through 1zz and enter here and on the applicable line of Part I	<b>2</b>		367
<b>3</b> Enter the amount from Form 8844 here and on the applicable line of Part II	<b>3</b>		
<b>4a</b> Investment (Form 3468, Part III) (attach Form 3468)	<b>4a</b>		
<b>b</b> Work opportunity (Form 5884)	<b>4b</b>		
<b>c</b> Biofuel producer (Form 6478)	<b>4c</b>		
<b>d</b> Low-income housing (Form 8586, Part II)	<b>4d</b>		
<b>e</b> Renewable electricity, refined coal, and Indian coal production (Form 8835)	<b>4e</b>		
<b>f</b> Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	<b>4f</b>	36-4804829	1
<b>g</b> Qualified railroad track maintenance (Form 8900)	<b>4g</b>		
<b>h</b> Small employer health insurance premiums (Form 8941)	<b>4h</b>		
<b>i</b> Increasing research activities (Form 6765)	<b>4i</b>		
<b>j</b> Employer credit for paid family and medical leave (Form 8994)	<b>4j</b>		
<b>z</b> Other	<b>4z</b>		
<b>5</b> Add lines 4a through 4z and enter here and on the applicable line of Part II	<b>5</b>		1
<b>6</b> Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	<b>6</b>		368

\* See instructions for limitation on this credit.

Name(s) shown on return

Identifying number

GORDON E. AND BETTY I. MOORE FOUNDATION

94-3397785

**Part III General Business Credits or Eligible Small Business Credits** (see instructions)

Complete a separate Part III for each box checked below. See instructions.

- A**  General Business Credit From a Non-Passive Activity      **E**  Reserved
- B**  General Business Credit From a Passive Activity      **F**  Reserved
- C**  General Business Credit Carryforwards      **G**  Eligible Small Business Credit Carryforwards
- D**  General Business Credit Carrybacks      **H**  Reserved

**I** If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III.

		(b) Enter EIN if claiming the credit from a pass-through entity.	(c) Enter the appropriate amount.
<b>(a) Description of credit</b>			
<b>Note:</b> On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity.			
<b>1a</b> Investment (Form 3468, Part II only) (attach Form 3468)	<b>1a</b>		
<b>b</b> Reserved	<b>1b</b>		
<b>c</b> Increasing research activities (Form 6765)	<b>1c</b>	82-1928309	3,163
<b>d</b> Low-income housing (Form 8586, Part I only)	<b>1d</b>		
<b>e</b> Disabled access (Form 8826)*	<b>1e</b>		
<b>f</b> Renewable electricity, refined coal, and Indian coal production (Form 8835)	<b>1f</b>		
<b>g</b> Indian employment (Form 8845)	<b>1g</b>		
<b>h</b> Orphan drug (Form 8820)	<b>1h</b>		
<b>i</b> New markets (Form 8874)	<b>1i</b>		
<b>j</b> Small employer pension plan startup costs and auto-enrollment (Form 8881)	<b>1j</b>		
<b>k</b> Employer-provided child care facilities and services (Form 8882)*	<b>1k</b>		
<b>l</b> Biodiesel and renewable diesel fuels (attach Form 8864)	<b>1l</b>		
<b>m</b> Low sulfur diesel fuel production (Form 8896)	<b>1m</b>		
<b>n</b> Distilled spirits (Form 8906)	<b>1n</b>		
<b>o</b> Nonconventional source fuel (carryforward only)	<b>1o</b>		
<b>p</b> Energy efficient home (Form 8908)	<b>1p</b>		
<b>q</b> Energy efficient appliance (carryforward only)	<b>1q</b>		
<b>r</b> Alternative motor vehicle (Form 8910)	<b>1r</b>		
<b>s</b> Alternative fuel vehicle refueling property (Form 8911)	<b>1s</b>		
<b>t</b> Enhanced oil recovery credit (carryforward only)	<b>1t</b>		
<b>u</b> Mine rescue team training (Form 8923)	<b>1u</b>		
<b>v</b> Agricultural chemicals security (carryforward only)	<b>1v</b>		
<b>w</b> Employer differential wage payments (Form 8932)	<b>1w</b>		
<b>x</b> Carbon oxide sequestration (Form 8933)	<b>1x</b>		
<b>y</b> Qualified plug-in electric drive motor vehicle (Form 8936)	<b>1y</b>		
<b>z</b> Qualified plug-in electric vehicle (carryforward only)	<b>1z</b>		
<b>aa</b> Employee retention (Form 5884-A)	<b>1aa</b>		
<b>bb</b> General credits from an electing large partnership (carryforward only)	<b>1bb</b>		
<b>zz</b> Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions)	<b>1zz</b>		
<b>2</b> Add lines 1a through 1zz and enter here and on the applicable line of Part I	<b>2</b>		3,163
<b>3</b> Enter the amount from Form 8844 here and on the applicable line of Part II	<b>3</b>		
<b>4a</b> Investment (Form 3468, Part III) (attach Form 3468)	<b>4a</b>		
<b>b</b> Work opportunity (Form 5884)	<b>4b</b>		
<b>c</b> Biofuel producer (Form 6478)	<b>4c</b>		
<b>d</b> Low-income housing (Form 8586, Part II)	<b>4d</b>		
<b>e</b> Renewable electricity, refined coal, and Indian coal production (Form 8835)	<b>4e</b>		
<b>f</b> Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	<b>4f</b>	98-0546998	34,569
<b>g</b> Qualified railroad track maintenance (Form 8900)	<b>4g</b>		
<b>h</b> Small employer health insurance premiums (Form 8941)	<b>4h</b>		
<b>i</b> Increasing research activities (Form 6765)	<b>4i</b>		
<b>j</b> Employer credit for paid family and medical leave (Form 8994)	<b>4j</b>		
<b>z</b> Other	<b>4z</b>		
<b>5</b> Add lines 4a through 4z and enter here and on the applicable line of Part II	<b>5</b>		34,569
<b>6</b> Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	<b>6</b>		37,732

\* See instructions for limitation on this credit.

Name(s) shown on return

Identifying number

GORDON E. AND BETTY I. MOORE FOUNDATION

94-3397785

**Part III General Business Credits or Eligible Small Business Credits** (see instructions)

Complete a separate Part III for each box checked below. See instructions.

- A**  General Business Credit From a Non-Passive Activity      **E**  Reserved
- B**  General Business Credit From a Passive Activity      **F**  Reserved
- C**  General Business Credit Carryforwards      **G**  Eligible Small Business Credit Carryforwards
- D**  General Business Credit Carrybacks      **H**  Reserved

**I** If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III.

		(b) Enter EIN if claiming the credit from a pass-through entity.	(c) Enter the appropriate amount.
<b>Note:</b> On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity.			
<b>(a) Description of credit</b>			
<b>1a</b> Investment (Form 3468, Part II only) (attach Form 3468) . . . . .	<b>1a</b>		
<b>b</b> Reserved . . . . .	<b>1b</b>		
<b>c</b> Increasing research activities (Form 6765) . . . . .	<b>1c</b>	47-3899327	43,822
<b>d</b> Low-income housing (Form 8586, Part I only) . . . . .	<b>1d</b>		
<b>e</b> Disabled access (Form 8826)*. . . . .	<b>1e</b>		
<b>f</b> Renewable electricity, refined coal, and Indian coal production (Form 8835) . . . . .	<b>1f</b>		
<b>g</b> Indian employment (Form 8845) . . . . .	<b>1g</b>		
<b>h</b> Orphan drug (Form 8820) . . . . .	<b>1h</b>		
<b>i</b> New markets (Form 8874) . . . . .	<b>1i</b>		
<b>j</b> Small employer pension plan startup costs and auto-enrollment (Form 8881) . . . . .	<b>1j</b>		
<b>k</b> Employer-provided child care facilities and services (Form 8882)* . . . . .	<b>1k</b>		
<b>l</b> Biodiesel and renewable diesel fuels (attach Form 8864) . . . . .	<b>1l</b>		
<b>m</b> Low sulfur diesel fuel production (Form 8896) . . . . .	<b>1m</b>		
<b>n</b> Distilled spirits (Form 8906) . . . . .	<b>1n</b>		
<b>o</b> Nonconventional source fuel (carryforward only) . . . . .	<b>1o</b>		
<b>p</b> Energy efficient home (Form 8908) . . . . .	<b>1p</b>		
<b>q</b> Energy efficient appliance (carryforward only) . . . . .	<b>1q</b>		
<b>r</b> Alternative motor vehicle (Form 8910) . . . . .	<b>1r</b>		
<b>s</b> Alternative fuel vehicle refueling property (Form 8911) . . . . .	<b>1s</b>		
<b>t</b> Enhanced oil recovery credit (carryforward only) . . . . .	<b>1t</b>		
<b>u</b> Mine rescue team training (Form 8923) . . . . .	<b>1u</b>		
<b>v</b> Agricultural chemicals security (carryforward only) . . . . .	<b>1v</b>		
<b>w</b> Employer differential wage payments (Form 8932) . . . . .	<b>1w</b>		
<b>x</b> Carbon oxide sequestration (Form 8933) . . . . .	<b>1x</b>		
<b>y</b> Qualified plug-in electric drive motor vehicle (Form 8936) . . . . .	<b>1y</b>		
<b>z</b> Qualified plug-in electric vehicle (carryforward only) . . . . .	<b>1z</b>		
<b>aa</b> Employee retention (Form 5884-A) . . . . .	<b>1aa</b>		
<b>bb</b> General credits from an electing large partnership (carryforward only) . . . . .	<b>1bb</b>		
<b>zz</b> Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions) . . . . .	<b>1zz</b>		
<b>2</b> Add lines 1a through 1zz and enter here and on the applicable line of Part I . . . . .	<b>2</b>		43,822
<b>3</b> Enter the amount from Form 8844 here and on the applicable line of Part II . . . . .	<b>3</b>		
<b>4a</b> Investment (Form 3468, Part III) (attach Form 3468) . . . . .	<b>4a</b>		
<b>b</b> Work opportunity (Form 5884) . . . . .	<b>4b</b>		
<b>c</b> Biofuel producer (Form 6478) . . . . .	<b>4c</b>		
<b>d</b> Low-income housing (Form 8586, Part II) . . . . .	<b>4d</b>		
<b>e</b> Renewable electricity, refined coal, and Indian coal production (Form 8835) . . . . .	<b>4e</b>		
<b>f</b> Employer social security and Medicare taxes paid on certain employee tips (Form 8846) . . . . .	<b>4f</b>		
<b>g</b> Qualified railroad track maintenance (Form 8900) . . . . .	<b>4g</b>		
<b>h</b> Small employer health insurance premiums (Form 8941) . . . . .	<b>4h</b>		
<b>i</b> Increasing research activities (Form 6765) . . . . .	<b>4i</b>		
<b>j</b> Employer credit for paid family and medical leave (Form 8994) . . . . .	<b>4j</b>		
<b>z</b> Other . . . . .	<b>4z</b>		
<b>5</b> Add lines 4a through 4z and enter here and on the applicable line of Part II . . . . .	<b>5</b>		0
<b>6</b> Add lines 2, 3, and 5 and enter here and on the applicable line of Part II . . . . .	<b>6</b>		43,822

\* See instructions for limitation on this credit.

Name(s) shown on return

Identifying number

GORDON E. AND BETTY I. MOORE FOUNDATION

94-3397785

**Part III General Business Credits or Eligible Small Business Credits** (see instructions)

Complete a separate Part III for each box checked below. See instructions.

- A**  General Business Credit From a Non-Passive Activity      **E**  Reserved
- B**  General Business Credit From a Passive Activity      **F**  Reserved
- C**  General Business Credit Carryforwards      **G**  Eligible Small Business Credit Carryforwards
- D**  General Business Credit Carrybacks      **H**  Reserved

**I** If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III.

		(b) Enter EIN if claiming the credit from a pass-through entity.		(c) Enter the appropriate amount.
<b>(a) Description of credit</b>				
<b>Note:</b> On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity.				
<b>1a</b> Investment (Form 3468, Part II only) (attach Form 3468)	<b>1a</b>			
<b>b</b> Reserved	<b>1b</b>			
<b>c</b> Increasing research activities (Form 6765)	<b>1c</b>			275,212
<b>d</b> Low-income housing (Form 8586, Part I only)	<b>1d</b>			2,810
<b>e</b> Disabled access (Form 8826)*	<b>1e</b>			
<b>f</b> Renewable electricity, refined coal, and Indian coal production (Form 8835)	<b>1f</b>			182,270
<b>g</b> Indian employment (Form 8845)	<b>1g</b>			
<b>h</b> Orphan drug (Form 8820)	<b>1h</b>			
<b>i</b> New markets (Form 8874)	<b>1i</b>			
<b>j</b> Small employer pension plan startup costs and auto-enrollment (Form 8881)	<b>1j</b>			
<b>k</b> Employer-provided child care facilities and services (Form 8882)*	<b>1k</b>			
<b>l</b> Biodiesel and renewable diesel fuels (attach Form 8864)	<b>1l</b>			
<b>m</b> Low sulfur diesel fuel production (Form 8896)	<b>1m</b>			
<b>n</b> Distilled spirits (Form 8906)	<b>1n</b>			
<b>o</b> Nonconventional source fuel (carryforward only)	<b>1o</b>			
<b>p</b> Energy efficient home (Form 8908)	<b>1p</b>			
<b>q</b> Energy efficient appliance (carryforward only)	<b>1q</b>			
<b>r</b> Alternative motor vehicle (Form 8910)	<b>1r</b>			
<b>s</b> Alternative fuel vehicle refueling property (Form 8911)	<b>1s</b>			
<b>t</b> Enhanced oil recovery credit (carryforward only)	<b>1t</b>			
<b>u</b> Mine rescue team training (Form 8923)	<b>1u</b>			
<b>v</b> Agricultural chemicals security (carryforward only)	<b>1v</b>			
<b>w</b> Employer differential wage payments (Form 8932)	<b>1w</b>			
<b>x</b> Carbon oxide sequestration (Form 8933)	<b>1x</b>			
<b>y</b> Qualified plug-in electric drive motor vehicle (Form 8936)	<b>1y</b>			
<b>z</b> Qualified plug-in electric vehicle (carryforward only)	<b>1z</b>			
<b>aa</b> Employee retention (Form 5884-A)	<b>1aa</b>			
<b>bb</b> General credits from an electing large partnership (carryforward only)	<b>1bb</b>			
<b>zz</b> Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions)	<b>1zz</b>			159,505
<b>2</b> Add lines 1a through 1zz and enter here and on the applicable line of Part I	<b>2</b>			619,797
<b>3</b> Enter the amount from Form 8844 here and on the applicable line of Part II	<b>3</b>			
<b>4a</b> Investment (Form 3468, Part III) (attach Form 3468)	<b>4a</b>			
<b>b</b> Work opportunity (Form 5884)	<b>4b</b>			
<b>c</b> Biofuel producer (Form 6478)	<b>4c</b>			
<b>d</b> Low-income housing (Form 8586, Part II)	<b>4d</b>			
<b>e</b> Renewable electricity, refined coal, and Indian coal production (Form 8835)	<b>4e</b>			
<b>f</b> Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	<b>4f</b>			295,816
<b>g</b> Qualified railroad track maintenance (Form 8900)	<b>4g</b>			
<b>h</b> Small employer health insurance premiums (Form 8941)	<b>4h</b>			
<b>i</b> Increasing research activities (Form 6765)	<b>4i</b>			
<b>j</b> Employer credit for paid family and medical leave (Form 8994)	<b>4j</b>			
<b>z</b> Other	<b>4z</b>			
<b>5</b> Add lines 4a through 4z and enter here and on the applicable line of Part II	<b>5</b>			295,816
<b>6</b> Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	<b>6</b>			915,613

\* See instructions for limitation on this credit.

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

▶ **Attach to your tax return.**

▶ **Go to [www.irs.gov/Form8990](http://www.irs.gov/Form8990) for instructions and the latest information.**

Taxpayer name(s) shown on tax return <b>GORDON E. AND BETTY I. MOORE FOUNDATION</b>	Identification number <b>94-3397785</b>
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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**

<b>1</b> Current year business interest expense (not including floor plan financing interest expense), before the section 163(j) limitation . . . . .	<b>1</b>	373,668		
<b>2</b> Disallowed business interest expense carryforwards from prior years. (Does not apply to a partnership) . . . . .	<b>2</b>	89,508		
<b>3</b> Partner's excess business interest expense treated as paid or accrued in current year (Schedule A, line 44, column (h)) . . . . .	<b>3</b>	51,314		
<b>4</b> Floor plan financing interest expense. See instructions . . . . .	<b>4</b>			
<b>5 Total business interest expense.</b> Add lines 1 through 4 . . . . . ▶	<b>5</b>			

**Section II—Adjusted Taxable Income**

**Taxable Income**

<b>6 Taxable income.</b> See instructions . . . . .	<b>6</b>	1,251,802
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**Additions** (adjustments to be made if amounts are taken into account on line 6)

<b>7</b> Any item of loss or deduction that is not properly allocable to a trade or business of the taxpayer. See instructions . . . . .	<b>7</b>				
<b>8</b> Any business interest expense not from a pass-through entity. See instructions . . . . .	<b>8</b>				
<b>9</b> Amount of any net operating loss deduction under section 172 . . . . .	<b>9</b>				
<b>10</b> Amount of any qualified business income deduction allowed under section 199A . . . . .	<b>10</b>				
<b>11</b> Deduction allowable for depreciation, amortization, or depletion attributable to a trade or business. See instructions . . . . .	<b>11</b>				
<b>12</b> Amount of any loss or deduction items from a pass-through entity. See instructions . . . . .	<b>12</b>	23,908,723			
<b>13</b> Other additions. See instructions . . . . .	<b>13</b>				
<b>14</b> Total current year partner's excess taxable income (Schedule A, line 44, column (f)) . . . . .	<b>14</b>	88,284			
<b>15</b> Total current year S corporation shareholder's excess taxable income (Schedule B, line 46, column (c)) . . . . .	<b>15</b>				
<b>16 Total.</b> Add lines 7 through 15 . . . . . ▶	<b>16</b>				23,997,007

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

<b>17</b> Any item of income or gain that is not properly allocable to a trade or business of the taxpayer. See instructions . . . . .	<b>17</b>	( )			
<b>18</b> Any business interest income not from a pass-through entity. See instructions . . . . .	<b>18</b>	( )			
<b>19</b> Amount of any income or gain items from a pass-through entity. See instructions . . . . .	<b>19</b>	(25,773,935)			
<b>20</b> Other reductions. See instructions . . . . .	<b>20</b>	( )			
<b>21 Total.</b> Combine lines 17 through 20 . . . . . ▶	<b>21</b>	(25,773,935)			
<b>22 Adjusted taxable income.</b> Combine lines 6, 16, and 21. (If zero or less, enter -0-.) . . . . . ▶	<b>22</b>				0

For Paperwork Reduction Act Notice, see the instructions.



**Section III—Business Interest Income**

<b>23</b>	Current year business interest income. See instructions . . . . .	<b>23</b>	273,256	
<b>24</b>	Excess business interest income from pass-through entities (total of Schedule A, line 44, column (g), and Schedule B, line 46, column (d)) . . . . .	<b>24</b>	0	
<b>25</b>	<b>Total.</b> Add lines 23 and 24 . . . . .			<b>25</b> 273,256

**Section IV—163(j) Limitation Calculations**

**Limitation on Business Interest Expense**

<b>26</b>	Multiply adjusted taxable income (line 22) by the applicable percentage. See instructions . . . . .	<b>26</b>		
<b>27</b>	Business interest income (line 25) . . . . .	<b>27</b>	273,256	
<b>28</b>	Floor plan financing interest expense (line 4) . . . . .	<b>28</b>		
<b>29</b>	<b>Total.</b> Add lines 26, 27, and 28 . . . . .			<b>29</b> 273,256

**Allowable Business Interest Expense**

<b>30</b>	<b>Total current year business interest expense deduction.</b> See instructions . . . . .	<b>30</b>		273,256
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**Carryforward**

FORM 990-T, LINE 5

<b>31</b>	<b>Disallowed business interest expense.</b> Subtract line 29 from line 5. (If zero or less, enter -0-.) . . . . .	<b>31</b>		241,234
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**Part II Partnership Pass-Through Items**

Part II is only completed by a partnership that is subject to section 163(j). The partnership items below are allocated to the partners and are not carried forward by the partnership. See the instructions for more information.

**Excess Business Interest Expense**

<b>32</b>	<b>Excess business interest expense.</b> Enter amount from line 31 . . . . .	<b>32</b>		
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**Excess Taxable Income** (If you entered an amount on line 32, skip lines 33 through 37.)

<b>33</b>	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0-.) . . . . .	<b>33</b>		
<b>34</b>	Subtract line 33 from line 26. (If zero or less, enter -0-.) . . . . .	<b>34</b>		
<b>35</b>	Divide line 34 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0-.) . . . . .	<b>35</b>	0.	
<b>36</b>	<b>Excess taxable income.</b> Multiply line 35 by line 22 . . . . .	<b>36</b>		

**Excess Business Interest Income**

<b>37</b>	<b>Excess business interest income.</b> Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less, enter -0-.) . . . . .	<b>37</b>		
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**Part III S Corporation Pass-Through Items**

Part III is only completed by S corporations that are subject to section 163(j). The S corporation items below are allocated to the shareholders. See the instructions for more information.

**Excess Taxable Income**

<b>38</b>	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0-.) . . . . .	<b>38</b>		
<b>39</b>	Subtract line 38 from line 26. (If zero or less, enter -0-.) . . . . .	<b>39</b>		
<b>40</b>	Divide line 39 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0-.) . . . . .	<b>40</b>	.	
<b>41</b>	<b>Excess taxable income.</b> Multiply line 40 by line 22 . . . . .	<b>41</b>		

**Excess Business Interest Income**

<b>42</b>	<b>Excess business interest income.</b> Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less, enter -0-.) . . . . .	<b>42</b>		
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**SCHEDULE A Summary of Partner's Section 163(j) Excess Items**

Any taxpayer that owns an interest in a partnership subject to section 163(j) should complete Schedule A before completing Part I.

(a) Name of partnership	(b) EIN	Excess Business Interest Expense			(f) Current year excess taxable income	(g) Current year excess business interest income	(h) Excess business interest expense treated as paid or accrued (see instructions)	(i) Current year excess business interest expense carryforward ((e) minus (h))
		(c) Current year	(d) Prior year carryforward	(e) Total ((c) plus (d))				
43 [REDACTED]	[REDACTED]	10,700	17,207	27,907	0	0	0	27,907
[REDACTED]	[REDACTED]	0	4,028	4,028	0	0	0	4,028
[REDACTED]	[REDACTED]	8,209	190,313	198,522	0	0	0	198,522
[REDACTED]	[REDACTED]	14,473	36,841	51,314	88,284	0	51,314	0
[REDACTED]	[REDACTED]	0	22,536	22,536	0	0	0	22,536
[REDACTED]	[REDACTED]	0	12,288	12,288	0	0	0	12,288
<b>44 Total</b>					88,284	0	51,314	

**SCHEDULE B Summary of S Corporation Shareholder's Excess Taxable Income and Excess Business Interest Income**

Any taxpayer that is required to complete Part I and is a shareholder in an S corporation that has excess taxable income or excess business interest income should complete Schedule B before completing Part I.

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

**SCHEDULE A Summary of Partner's Section 163(j) Excess Items**

Any taxpayer that owns an interest in a partnership subject to section 163(j) should complete Schedule A before completing Part I.

(a) Name of partnership	(b) EIN	Excess Business Interest Expense			(f) Current year excess taxable income	(g) Current year excess business interest income	(h) Excess business interest expense treated as paid or accrued (see instructions)	(i) Current year excess business interest expense carryforward ((e) minus (h))
		(c) Current year	(d) Prior year carryforward	(e) Total ((c) plus (d))				
43 [REDACTED]	[REDACTED]	0	8,640	8,640	0	0	0	8,640
[REDACTED]	[REDACTED]	0	11,127	11,127	0	0	0	11,127
				0			0	0
				0			0	0
				0			0	0
				0			0	0
<b>44 Total</b>					0	0	0	

**SCHEDULE B Summary of S Corporation Shareholder's Excess Taxable Income and Excess Business Interest Income**

Any taxpayer that is required to complete Part I and is a shareholder in an S corporation that has excess taxable income or excess business interest income should complete Schedule B before completing Part I.

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

SCHEDULE OF CHARITABLE CONTRIB. DEDUCTIONS GENERATED, UTILIZED & CONVERTED TO NOL

	<u>AMOUNT GENERATED</u>	<u>AMOUNT UTILIZED</u>	<u>CONVERTED TO NOL CARRYOVER</u>	<u>REMAINING CARRYOVER</u>
2015	290,758,297	-	-	290,758,297
2016	291,327,493	-	-	291,327,493
2017	288,317,025	-	-	288,317,025
2018	300,551,892	-	-	300,551,892
2019	298,397,401	-	-	298,397,401
2020	272,087,052	139,089	-	271,947,963
	<u>1,741,439,160</u>	<u>139,089</u>	-	<u>1,741,300,071</u>
				<u>(290,758,297)</u>
				<u>1,450,541,774</u>

TOTAL CARRIED FORWARD TO 2021

GORDON E. AND BETTY I. MOORE FOUNDATION  
NET OPERATING LOSS CARRYFORWARDS TO 2021

EIN: 94-3397785

FORM 990-T, PART I, LINE 6 - NET OPERATING LOSS DEDUCTION

PARTNERSHIP INVESTMENTS - QPI

	NOL GENERATED	AMOUNT UTILIZED IN PRIOR YEARS	CONVERTED CHARITABLE CONTRIBUTIONS	AMOUNT UTILIZED IN 2020	NOL REMAINING
2018	(24,827,158)	997,218	-	-	(23,829,940)
2019	(1,962,455)	-	-	-	(1,962,455) *
2020	(61,018)	-	-	-	(61,018)
NOL CARRYFORWARD TO 2021					<u><u>(25,853,413)</u></u>

\* ADJUSTED TO REFLECT SECTION 163(j)(4)(B)(iii)(II) BASIS ADDBACK RULE

FORM 3800, PART I, LINE 4 - CARRYFORWARD OF GENERAL BUSINESS CREDIT TO 2021

	CREDIT GENERATED	UTILIZED IN PRIOR YEAR	UTILIZED IN CURRENT YEAR	AMOUNT CARRIED FORWARD	BALANCE
2010	98,394	84,524	13,870	-	-
2011	96,216	9	96,207	-	-
2012	57,285	-	57,285	-	-
2013	32,246	-	32,246	-	-
2014	40,526	-	3,643	36,883	36,883
2015	151,907	121,743	-	30,164	67,047
2016	361,334	217,481	-	143,853	210,900
2017	237,369	198,412	-	38,957	249,857
2018	71,610	-	-	71,610	321,467
2019	95,079	-	-	95,079	416,546
2020	50,001	-	-	50,001	466,547
GENERAL BUSINESS CREDIT CARRYFORWARD TO 12/31/2021					466,547

FORM 3800, PART II, LINE 34 - CARRYFORWARD OF GENERAL BUSINESS CREDIT TO 2021

	CREDIT GENERATED	UTILIZED IN PRIOR YEAR	UTILIZED IN CURRENT YEAR	AMOUNT CARRIED FORWARD	BALANCE
2010	-	-	-	-	-
2011	-	-	-	-	-
2012	-	-	-	-	-
2013	-	-	-	-	-
2014	-	-	-	-	-
2015	-	-	-	-	-
2016	-	-	-	-	-
2017	-	-	-	-	-
2018	151,764	-	-	151,764	151,764
2019	144,052	-	-	144,052	295,816
2020	34,578	-	-	34,578	330,394
GENERAL BUSINESS CREDIT CARRYFORWARD TO 12/31/2021					330,394

GORDON E. AND BETTY I. MOORE FOUNDATION  
 GENERAL BUSINESS CREDIT CARRYFORWARDS TO 2021

EIN: 94-3397785

FORM 3800 PART II, LINE	PASS-THROUGH ENTITY EIN	CREDIT	UTILIZED IN 2020	TOTAL
2010 LINE 1F	98-0481298	13,870	(13,870)	-
2011 LINE 1C	13-4253825	17	(17)	
2011 LINE 1F	98-0481298	96,190	(96,190)	-
2012 LINE 1C	98-0481298	57,203	(57,203)	
2012 LINE 1ZZ	98-1017204	82	(82)	-
2013 LINE 1F	98-0481298	32,241	(32,241)	
2013 LINE 1ZZ	04-3514360	5	(5)	-
2014 LINE 1F	98-0481298	39,969	(3,643)	
2014 LINE 1ZZ	04-3455023	330		
2014 LINE 1ZZ	04-3514360	10		
2014 LINE 1ZZ	98-0492359	19		
2014 LINE 1ZZ	46-2445852	198		36,883
2015 LINE 1C	46-2445852	4		
2015 LINE 1C	98-1087032	549		
2015 LINE 1ZZ	20-3701566	54		
2015 LINE 1ZZ	04-3514360	1,132		
2015 LINE 1ZZ	98-0546998	284		
2015 LINE 1ZZ	98-0481298	28,141		30,164
2016 LINE 1C	46-2445852	11,122		
2016 LINE 1C	81-1279864	1,145		
2016 LINE 1C	98-1087032	473		
2016 LINE 1D	04-3455023	1,855		
2016 LINE 1D	04-3514360	8		
2016 LINE 1ZZ	04-3455023	124,687		
2016 LINE 1ZZ	04-3514360	536		
2016 LINE 1ZZ	20-3701566	2		
2016 LINE 1ZZ	98-1162665	4,025		143,853
2017 LINE 1C	81-3837664	340		
2017 LINE 1C	82-1928309	1,513		
2017 LINE 1C	46-2445852	36,215		
2017 LINE 1C	98-1087032	689		
2017 LINE 1D	04-3455023	199		
2017 LINE 1D	04-3514360	1		38,957
2018 LINE 1C	98-1389059	57,579		
2018 LINE 1C	98-0481298	9,240		
2018 LINE 1C	98-1011477	3,471		
2018 LINE 1C	83-0811600	968		
2018 LINE 1C	04-3514360	1		

2018 LINE 1D	04-3455023	340	
2018 LINE 1D	36-4804829	9	
2018 LINE 1D	04-3514360	2	
			<u>71,610</u>

2019 LINE 1C	04-3514360	1	
2019 LINE 1C	83-0811600	1,184	
2019 LINE 1C	47-3899327	89,945	
2019 LINE 1C	98-0678098	1	
2019 LINE 1C	82-1928309	3,286	
2019 LINE 1C	98-1467550	266	
2019 LINE 1D	04-3455023	282	
2019 LINE 1D	04-3514360	1	
2019 LINE 1D	36-4804829	113	
			<u>95,079</u>

2020 LINE 1C	83-0811600	1,252	
2020 LINE 1C	98-1087032	994	
2020 LINE 1C	37-1875850	367	
2020 LINE 1C	82-1928309	3,163	
2020 LINE 1C	47-3899327	43,822	
2020 LINE 1D	04-3455023	292	
2020 LINE 1D	36-4804829	111	
			<u>50,001</u>

TO FORM 3800, PART III, BOXES A & C, LINE 2 466,547

2018 LINE 4F	98-0546998	151,751	
2018 LINE 4F	04-3514360	13	
			<u>151,764</u>

2019 LINE 4F	04-3455023	76	
2019 LINE 4F	04-3514360	16	
2019 LINE 4F	36-4804829	32	
2019 LINE 4F	98-0546998	143,928	
			<u>144,052</u>

2020 LINE 4F	04-3455023	1	
2020 LINE 4F	04-3514360	7	
2020 LINE 4F	36-4804829	1	
2020 LINE 4F	98-0546998	34,569	
			<u>34,578</u>

TO FORM 3800, PART III, BOXES A & C, LINE 5 330,394



# Noncash Charitable Contributions

▶ **Attach one or more Forms 8283 to your tax return if you claimed a total deduction of over \$500 for all contributed property.**

▶ **Go to [www.irs.gov/Form8283](http://www.irs.gov/Form8283) for instructions and the latest information.**

Name(s) shown on your income tax return **RED LOBSTER MASTER HOLDINGS, LP**

Identifying number  
**47-1362172**

**Note:** Figure the amount of your contribution deduction before completing this form. See your tax return instructions.

**Section A. Donated Property of \$5,000 or Less and Publicly Traded Securities** - List in this section **only** an item (or a group of similar items) for which you claimed a deduction of \$5,000 or less. Also list publicly traded securities and certain other property even if the deduction is more than \$5,000. See instructions.

**Part I Information on Donated Property** - If you need more space, attach a statement.

1	(a) Name and address of the donee organization	(b) If donated property is a vehicle (see instructions), check the box. Also enter the vehicle identification number (unless Form 1098-C is attached).	(c) Description and condition of donated property (For a vehicle, enter the year, make, model, and mileage. For securities and other property, see instructions.)
<b>A</b>	N/A	<input type="checkbox"/>	
<b>B</b>		<input type="checkbox"/>	
<b>C</b>		<input type="checkbox"/>	
<b>D</b>		<input type="checkbox"/>	
<b>E</b>		<input type="checkbox"/>	

**Note:** If the amount you claimed as a deduction for an item is \$500 or less, you do not have to complete columns (e), (f), and (g).

	(d) Date of the contribution	(e) Date acquired by donor (mo., yr.)	(f) How acquired by donor	(g) Donor's cost or adjusted basis	(h) Fair market value (see instructions)	(i) Method used to determine the fair market value
<b>A</b>						
<b>B</b>						
<b>C</b>						
<b>D</b>						
<b>E</b>						

**Section B. Donated Property Over \$5,000 (Except Publicly Traded Securities, Vehicles, Intellectual Property or Inventory Reportable in Section A)** - Complete this section for one item (or a group of similar items) for which you claimed a deduction of more than \$5,000 per item or group (except contributions reportable in Section A). Provide a separate form for each item donated unless it is part of a group of similar items. A qualified appraisal is generally required for items reportable in Section B. See instructions.

**Part I Information on Donated Property**

**2** Check the box that describes the type of property donated.

- |  |  |   |
|--|--|---|
| a <input type="checkbox"/> Art* (contribution of \$20,000 or more)   | e <input type="checkbox"/> Other Real Estate     | i <input type="checkbox"/> Vehicles                     |
| b <input type="checkbox"/> Qualified Conservation Contribution       | f <input type="checkbox"/> Securities            | j <input type="checkbox"/> Clothing and household items |
| c <input type="checkbox"/> Equipment                                 | g <input type="checkbox"/> Collectibles**        | k <input checked="" type="checkbox"/> Other             |
| d <input type="checkbox"/> Art* (contribution of less than \$20,000) | h <input type="checkbox"/> Intellectual Property |   |

\*Art includes paintings, sculptures, watercolors, prints, drawings, ceramics, antiques, decorative arts, textiles, carpets, silver, rare manuscripts, historical memorabilia, and other similar objects.

\*\*Collectibles include coins, stamps, books, gems, jewelry, sports memorabilia, dolls, etc., but not art as defined above.

**Note.** In certain cases, you must attach a qualified appraisal of the property. See instructions.

3	(a) Description of donated property (if you need more space, attach a separate statement)	(b) If any tangible personal property or real property was donated, give a brief summary of the overall physical condition of the property at the time of the gift.	(c) Appraised fair market value
<b>A</b>	INVENTORIES - MEATS, POULTRY	GOOD	5,996,029.
<b>B</b>			
<b>C</b>			

  

	(d) Date acquired by donor (mo., yr.)	(e) How acquired by donor	(f) Donor's cost or adjusted basis	(g) For bargain sales, enter amount received and attach a separate statement.	(h) Amount claimed as a deduction (see instructions)	(i) Date of contribution (see instructions)
<b>A</b>	VAR	PURCHASED	2,059,100.		3,817,795.	VAR
<b>B</b>						
<b>C</b>						

For Paperwork Reduction Act Notice, see separate instructions.

Name(s) shown on your income tax return RED LOBSTER MASTER HOLDINGS, LP

Identifying number 47-1362172

Part II Partial Interests and Restricted Use Property (Other Than Qualified Conservation Contributions) -

Complete lines 4a through 4e if you gave less than an entire interest in a property listed in Section B, Part I. Complete lines 5a through 5c if conditions were placed on a contribution listed in Section B, Part I; also attach the required statement. See instructions.

- 4a Enter the letter from Section B, Part I that identifies the property for which you gave less than an entire interest
b Total amount claimed as a deduction for the property listed in Section B, Part I: (1) For this tax year... (2) For any prior tax years
c Name and address of each organization to which any such contribution was made in a prior year (complete only if different from the donee organization above): Name of charitable organization (donee)

Address (number, street, and room or suite no.) City or town, state, and ZIP code

- d For tangible property, enter the place where the property is located or kept
e Name of any person, other than the donee organization, having actual possession of the property

Table with 2 columns: Question (5a, 5b, 5c), Yes, No. 5a: Is there a restriction, either temporary or permanent, on the donee's right to use or dispose of the donated property? 5b: Did you give to anyone... the right to the income from the donated property... 5c: Is there a restriction limiting the donated property for a particular use?

Part III Taxpayer (Donor) Statement - List each item included in Section B, Part I above that the appraisal identifies as having a value of \$500 or less. See instructions.

I declare that the following item(s) included in Section B, Part I above has to the best of my knowledge and belief an appraised value of not more than \$500 (per item). Enter identifying letter from Section B, Part I and describe the specific item. See instructions.

Signature of taxpayer (donor) Date

Part IV Declaration of Appraiser

I declare that I am not the donor, the donee, a party to the transaction in which the donor acquired the property, employed by, or related to any of the foregoing persons, or married to any person who is related to any of the foregoing persons. And, if regularly used by the donor, donee, or party to the transaction, I performed the majority of my appraisals during my tax year for other persons.

Also, I declare that I perform appraisals on a regular basis; and that because of my qualifications as described in the appraisal, I am qualified to make appraisals of the type of property being valued. I certify that the appraisal fees were not based on a percentage of the appraised property value. Furthermore, I understand that a false or fraudulent overstatement of the property value as described in the qualified appraisal or this Form 8283 may subject me to the penalty under section 6701(a) (aiding and abetting the understatement of tax liability). I understand that my appraisal will be used in connection with a return or claim for refund. I also understand that, if there is a substantial or gross valuation misstatement of the value of the property claimed on the return or claim for refund that is based on my appraisal, I may be subject to a penalty under section 6695A of the Internal Revenue Code, as well as other applicable penalties. I affirm that I have not been at any time in the three-year period ending on the date of the appraisal barred from presenting evidence or testimony before the Department of the Treasury or the Internal Revenue Service pursuant to 31 U.S.C. 330(c).

Sign Here Appraiser signature Appraiser name Title Date

Business address (including room or suite no.) Identifying number

City or town, state, and ZIP code

Part V Donee Acknowledgment

This charitable organization acknowledges that it is a qualified organization under section 170(c) and that it received the donated property as described in Section B, Part I, above on the following date

Furthermore, this organization affirms that in the event it sells, exchanges, or otherwise disposes of the property described in Section B, Part I (or any portion thereof) within 3 years after the date of receipt, it will file Form 8282, Donee Information Return, with the IRS and give the donor a copy of that form. This acknowledgment does not represent agreement with the claimed fair market value.

Does the organization intend to use the property for an unrelated use? Yes No

Name of charitable organization (donee) Employer identification number Address (number, street, and room or suite no.) City or town, state, and ZIP code Authorized signature STMT 23 Title Date

=====

EXPLANATION OF WHY GETTING A DONEE'S SIGNATURE IS IMPOSSIBLE

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RED LOBSTER MASTER HOLDINGS, LP ("RED LOBSTER") HAS ENGAGED FOOD DONATION CONNECTION LLC ("FDC") TO PERFORM THE PICK-UP, TRANSPORTATION AND DELIVERY OF DONATED FOODS FROM SEVERAL OF ITS RESTAURANTS TO OVER 350 TAX EXEMPT ORGANIZATIONS WHOSE PURPOSE IS THE CARE OF THE ILL, THE NEEDY OR INFANTS. AS PART OF THE SERVICES PROVIDED, FDC MAINTAINS A COMPLETE LOG OF ALL FOODS DONATED BY FOOD TYPE AND DATE OF THE DONATION, THE SOURCE OF WHICH IS USED TO COMPUTE THE VALUE OF THE DONATION.

EACH DONATION LOG REQUIRES THE DONEE TO ACKNOWLEDGE AND SIGN THE LOG REPRESENTING THE FOLLOWING TO RED LOBSTER:

- 1) THE DONATED PRODUCT WAS USED IN A PURPOSE RELATED TO THEIR TAX - EXEMPTION AND SOLELY FOR THE CARE OF THE ILL, THE NEEDY OR INFANTS AND THAT THE DONATED PRODUCT WAS NOT TRANSFERRED IN EXCHANGE FOR MONEY, OTHER PROPERTY, OR SERVICES;
- 2) THAT THE DONEE IS A SECTION 501(C)(3) TAX EXEMPT, U.S. NONPROFIT PUBLIC CHARITY QUALIFIED TO RECEIVE TAX-DEDUCTIBLE CONTRIBUTIONS AND IT IS NOT A PRIVATE FOUNDATION;
- 3) THAT THE DONEE WILL MAINTAIN ADEQUATE BOOKS AND RECORDS TO SHOW THE DISPOSITION AND USE OF THE DONATED PRODUCT WHICH WILL BE MADE AVAILABLE TO THE INTERNAL REVENUE SERVICE UPON REQUEST;
- 4) NO GOODS OR SERVICES WERE PROVIDED BY RED LOBSTER IN EXCHANGE FOR THIS CHARITABLE DONATION;
- 5) DONEE ACKNOWLEDGES RECEIPT OF THE FOOD DONATION AMOUNTS RECORDED ON THE LOG.

IN ADDITION TO THE ABOVE, THE DONATION LOG LISTS THE NON-PROFIT RECIPIENT NAME AND MAILING ADDRESS AND REQUIRES THE SIGNATURE OF THE APPROPRIATE AGENCY REPRESENTATIVE.

ALL OF THIS INFORMATION IS AVAILABLE TO THE IRS UPON REQUEST.

2 Invest  
Gordon and Betty Moore  
Foundation

# Noncash Charitable Contributions

▶ Attach one or more Forms 8283 to your tax return if you claimed a total deduction of over \$500 for all contributed property.

▶ Go to [www.irs.gov/Form8283](http://www.irs.gov/Form8283) for instructions and the latest information.

Name(s) shown on your income tax return **GGCOF REAL ESTATE SPLITTER, LP  
(FKA GGCOF RL SPLITTER, LP)**

Identifying number  
**47-2194048**

**Note:** Figure the amount of your contribution deduction before completing this form. See your tax return instructions.

**Section A. Donated Property of \$5,000 or Less and Publicly Traded Securities** - List in this section **only** an item (or a group of similar items) for which you claimed a deduction of \$5,000 or less. Also list publicly traded securities and certain other property even if the deduction is more than \$5,000. See instructions.

**Part I Information on Donated Property** - If you need more space, attach a statement.

1	(a) Name and address of the donee organization	(b) If donated property is a vehicle (see instructions), check the box. Also enter the vehicle identification number (unless Form 1098-C is attached).	(c) Description and condition of donated property (For a vehicle, enter the year, make, model, and mileage. For securities and other property, see instructions.)
A	N/A	<input type="checkbox"/>	
B		<input type="checkbox"/>	
C		<input type="checkbox"/>	
D		<input type="checkbox"/>	
E		<input type="checkbox"/>	

**Note:** If the amount you claimed as a deduction for an item is \$500 or less, you do not have to complete columns (e), (f), and (g).

	(d) Date of the contribution	(e) Date acquired by donor (mo., yr.)	(f) How acquired by donor	(g) Donor's cost or adjusted basis	(h) Fair market value (see instructions)	(i) Method used to determine the fair market value
A						
B						
C						
D						
E						

**Section B. Donated Property Over \$5,000 (Except Publicly Traded Securities, Vehicles, Intellectual Property or Inventory Reportable in Section A)** - Complete this section for one item (or a group of similar items) for which you claimed a deduction of more than \$5,000 per item or group (except contributions reportable in Section A). Provide a separate form for each item donated unless it is part of a group of similar items. A qualified appraisal is generally required for items reportable in Section B. See instructions.

**Part I Information on Donated Property**

2 Check the box that describes the type of property donated.

- |                            |   |                            |                       |                                       |                              |
|----------------------------|---|----------------------------|-----------------------|---------------------------------------|------------------------------|
| a <input type="checkbox"/> | Art* (contribution of \$20,000 or more)   | e <input type="checkbox"/> | Other Real Estate     | i <input type="checkbox"/>            | Vehicles                     |
| b <input type="checkbox"/> | Qualified Conservation Contribution       | f <input type="checkbox"/> | Securities            | j <input type="checkbox"/>            | Clothing and household items |
| c <input type="checkbox"/> | Equipment                                 | g <input type="checkbox"/> | Collectibles**        | k <input checked="" type="checkbox"/> | Other                        |
| d <input type="checkbox"/> | Art* (contribution of less than \$20,000) | h <input type="checkbox"/> | Intellectual Property |                                       |                              |

\*Art includes paintings, sculptures, watercolors, prints, drawings, ceramics, antiques, decorative arts, textiles, carpets, silver, rare manuscripts, historical memorabilia, and other similar objects.

\*\*Collectibles include coins, stamps, books, gems, jewelry, sports memorabilia, dolls, etc., but not art as defined above.

**Note.** In certain cases, you must attach a qualified appraisal of the property. See instructions.

3	(a) Description of donated property (if you need more space, attach a separate statement)	(b) If any tangible personal property or real property was donated, give a brief summary of the overall physical condition of the property at the time of the gift.	(c) Appraised fair market value
A	INVENTORIES - MEATS, POULTRY	GOOD	2,170,404.
B			
C			

  

	(d) Date acquired by donor (mo., yr.)	(e) How acquired by donor	(f) Donor's cost or adjusted basis	(g) For bargain sales, enter amount received and attach a separate statement.	(h) Amount claimed as a deduction (see instructions)	(i) Date of contribution (see instructions)
A	VAR	PURCHASED	768,713.		1,381,941.	VAR
B						
C						

For Paperwork Reduction Act Notice, see separate instructions.

Name(s) shown on your income tax return GGCOF REAL ESTATE SPLITTER, LP (FKA GGCOF RL SPLITTER, LP)

Identifying number 47-2194048

Part II Partial Interests and Restricted Use Property (Other Than Qualified Conservation Contributions) -

Complete lines 4a through 4e if you gave less than an entire interest in a property listed in Section B, Part I. Complete lines 5a through 5c if conditions were placed on a contribution listed in Section B, Part I; also attach the required statement. See instructions.

4a Enter the letter from Section B, Part I that identifies the property for which you gave less than an entire interest. If Section B, Part II applies to more than one property, attach a separate statement.

b Total amount claimed as a deduction for the property listed in Section B, Part I: (1) For this tax year. . . . (2) For any prior tax years

c Name and address of each organization to which any such contribution was made in a prior year (complete only if different from the donee organization above): Name of charitable organization (donee)

Address (number, street, and room or suite no.) City or town, state, and ZIP code

d For tangible property, enter the place where the property is located or kept

e Name of any person, other than the donee organization, having actual possession of the property

5a Is there a restriction, either temporary or permanent, on the donee's right to use or dispose of the donated property?
5b Did you give to anyone (other than the donee organization or another organization participating with the donee organization in cooperative fundraising) the right to the income from the donated property or to the possession of the property, including the right to vote donated securities, to acquire the property by purchase or otherwise, or to designate the person having such income, possession, or right to acquire?
5c Is there a restriction limiting the donated property for a particular use?

Table with 2 columns: Yes, No. Rows corresponding to questions 5a, 5b, and 5c.

Part III Taxpayer (Donor) Statement - List each item included in Section B, Part I above that the appraisal identifies as having a value of \$500 or less. See instructions.

I declare that the following item(s) included in Section B, Part I above has to the best of my knowledge and belief an appraised value of not more than \$500 (per item). Enter identifying letter from Section B, Part I and describe the specific item. See instructions.

Signature of taxpayer (donor)

Date

Part IV Declaration of Appraiser

I declare that I am not the donor, the donee, a party to the transaction in which the donor acquired the property, employed by, or related to any of the foregoing persons, or married to any person who is related to any of the foregoing persons. And, if regularly used by the donor, donee, or party to the transaction, I performed the majority of my appraisals during my tax year for other persons.

Also, I declare that I perform appraisals on a regular basis; and that because of my qualifications as described in the appraisal, I am qualified to make appraisals of the type of property being valued. I certify that the appraisal fees were not based on a percentage of the appraised property value. Furthermore, I understand that a false or fraudulent overstatement of the property value as described in the qualified appraisal or this Form 8283 may subject me to the penalty under section 6701(a) (aiding and abetting the understatement of tax liability). I understand that my appraisal will be used in connection with a return or claim for refund. I also understand that, if there is a substantial or gross valuation misstatement of the value of the property claimed on the return or claim for refund that is based on my appraisal, I may be subject to a penalty under section 6695A of the Internal Revenue Code, as well as other applicable penalties. I affirm that I have not been at any time in the three-year period ending on the date of the appraisal barred from presenting evidence or testimony before the Department of the Treasury or the Internal Revenue Service pursuant to 31 U.S.C. 330(c).

Sign Here Appraiser signature Appraiser name Title Date

Business address (including room or suite no.) Identifying number

City or town, state, and ZIP code

Part V Donee Acknowledgment

This charitable organization acknowledges that it is a qualified organization under section 170(c) and that it received the donated property as described in Section B, Part I, above on the following date

Furthermore, this organization affirms that in the event it sells, exchanges, or otherwise disposes of the property described in Section B, Part I (or any portion thereof) within 3 years after the date of receipt, it will file Form 8282, Donee Information Return, with the IRS and give the donor a copy of that form. This acknowledgment does not represent agreement with the claimed fair market value.

Does the organization intend to use the property for an unrelated use? Yes No

Name of charitable organization (donee) Employer identification number

Address (number, street, and room or suite no.) City or town, state, and ZIP code

Authorized signature STMT 3 Title Date

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EXPLANATION OF WHY GETTING A DONEE'S SIGNATURE IS IMPOSSIBLE

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RED LOBSTER MASTER HOLDINGS, LP ("RED LOBSTER") HAS ENGAGED FOOD DONATION CONNECTION LLC ("FDC") TO PERFORM THE PICK-UP, TRANSPORTATION AND DELIVERY OF DONATED FOODS FROM SEVERAL OF ITS RESTAURANTS TO OVER 350 TAX EXEMPT ORGANIZATIONS WHOSE PURPOSE IS THE CARE OF THE ILL, THE NEEDY OR INFANTS. AS PART OF THE SERVICES PROVIDED, FDC MAINTAINS A COMPLETE LOG OF ALL FOODS DONATED BY FOOD TYPE AND DATE OF THE DONATION, THE SOURCE OF WHICH IS USED TO COMPUTE THE VALUE OF THE DONATION.

EACH DONATION LOG REQUIRES THE DONEE TO ACKNOWLEDGE AND SIGN THE LOG REPRESENTING THE FOLLOWING TO RED LOBSTER:

- 1) THE DONATED PRODUCT WAS USED IN A PURPOSE RELATED TO THEIR TAX - EXEMPTION AND SOLELY FOR THE CARE OF THE ILL, THE NEEDY OR INFANTS AND THAT THE DONATED PRODUCT WAS NOT TRANSFERRED IN EXCHANGE FOR MONEY, OTHER PROPERTY, OR SERVICES;
- 2) THAT THE DONEE IS A SECTION 501(C)(3) TAX EXEMPT, U.S. NONPROFIT PUBLIC CHARITY QUALIFIED TO RECEIVE TAX-DEDUCTIBLE CONTRIBUTIONS AND IT IS NOT A PRIVATE FOUNDATION;
- 3) THAT THE DONEE WILL MAINTAIN ADEQUATE BOOKS AND RECORDS TO SHOW THE DISPOSITION AND USE OF THE DONATED PRODUCT WHICH WILL BE MADE AVAILABLE TO THE INTERNAL REVENUE SERVICE UPON REQUEST;
- 4) NO GOODS OR SERVICES WERE PROVIDED BY RED LOBSTER IN EXCHANGE FOR THIS CHARITABLE DONATION;
- 5) DONEE ACKNOWLEDGES RECEIPT OF THE FOOD DONATION AMOUNTS RECORDED ON THE LOG.

IN ADDITION TO THE ABOVE, THE DONATION LOG LISTS THE NON-PROFIT RECIPIENT NAME AND MAILING ADDRESS AND REQUIRES THE SIGNATURE OF THE APPROPRIATE AGENCY REPRESENTATIVE.

ALL OF THIS INFORMATION IS AVAILABLE TO THE IRS UPON REQUEST.

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

► **File a separate application for each return.**  
► **Go to [www.irs.gov/Form8868](http://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](http://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.

<b>Type or print</b>  File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions.  GORDON E. AND BETTY I. MOORE FOUNDATION	Taxpayer identification number (TIN)  94-3397785
	Number, street, and room or suite no. If a P.O. box, see instructions. 1661 PAGE MILL ROAD	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. PALO ALTO, CA 94304	

Enter the Return Code for the return that this application is for (file a separate application for each return) . . . . . 07

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

JANCY GOH

• The books are in the care of ► 1661 PAGE MILL ROAD PALO ALTO CA 94304

Telephone No. ► 650 213-3000 Fax No. ►

• If the organization does not have an office or place of business in the United States, check this box . . . . .

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . . . . . . If this is for the whole group, check this box . . . . .  . If it is for part of the group, check this box . . . . .  and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until 11/15, 2021, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

►  calendar year 2020 or  
►  tax year beginning \_\_\_\_\_, 20\_\_\_\_, and ending \_\_\_\_\_, 20\_\_\_\_.

2 If the tax year entered in line 1 is for less than 12 months, check reason:  Initial return  Final return  
 Change in accounting period

<b>3a</b> If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b> \$	0.
<b>b</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.	<b>3b</b> \$	1,000,000.
<b>c</b> <b>Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b> \$	0.

**Caution:** If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

**For Privacy Act and Paperwork Reduction Act Notice, see instructions.**