Form 990-PF

Return of Private Foundation

OMB No 1545-0052

or Section 4947(a)(1) Nonexempt Charitable Trust

Department of the Treasury Internal Revenue Service

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

2002

For cale	ndar year 2002, o	r tax year beginning 🛛 🛛 J U	JL 1, 2002	, and ending		<u>JUN 30, 2003</u>	
G Chec	k all that apply	Initial return	🗌 Finai return	Amended return		Address change	Name change
Use the	Name of org	ganization				A Employer identification	number
labe							
Otherw	ise KIPP F	OUNDATION				94-3362724	
prin		treet (or PO box number if mail is no	ot delivered to street address)	Roon	n/suite	B Telephone number	
or typ		PEAR STREET		510)	(415)399-1	556
See Sp	ecific City or town	, state, and ZIP code				C If exemption application is p	ending, check here
Instruct			94105-1657			D 1. Foreign organizations	s, check here 🛛 🕨 📃
H Chec	k type of organizat) exempt private foundation			Foreign organizations me check here and attach co	eting the 85% test,
		nonexempt charitable trust	Other taxable private for				
			unting method Cas	h X Accrual	-	E If private foundation sta under section 507(b)(1)	
	Part II, col. (c), li	· · · · ·	Other (specify)			F if the foundation is in a	
▶\$,522,142 . (Part I, c		sh basis)		under section 507(b)(1)	
Part	Analysis of Rev	venue and Expenses	(a) Revenue and	(b) Net investri	nent	(c) Adjusted net	(d) Disbursements
	The total of amou) لنت	nts in columns (b), (c), and (d) may no the amounts in column (a))	expenses per book			income	for charitable purposes (cash basis only)
1		ifts, grants, etc , received	14,742,77	9.			
1.		the foundation is not required to attach Sch. B					
2		m split-interest trusts					
2	Interest on savings cash investments		19,16	3 19.	163.	19,163,	STATEMENT 2
4		iterest from securities					
	a Gross rents	Releat Hold Securities					
		- -)				
	(Net rental income of Net gain or (loss) from line 10	om sale of assets not on	<51	9.5			STATEMENT 1
=	D Gross sales price for	or all 1,500					
Š,	assets on line 6a		•		0.		
		come (from Part IV, line 2)			•••	0.	
	Netereny						
10	Gross sales less re						
	and allowances						1
	Gross profit or (
1.	Contraction of the local division of the loc		35,35	9	0.	35,359.	STATEMENT 3
	OCDEN, Total: Add lines		14,796,78		163.	54,522.	
42	<u>.</u>		261,88		0.	0.	261,888
13	•	officers, directors, trustees, etc	4,888,88		0.	0.	
14		salaries and wages employee benefits	531,52		0.	0.	531,521
35 S S S S S		STMT 4	126,63		0.	0.	
Su I	ia Legal fees		28,45		0.	0.	· · · · · · · · · · · · · · · · · · ·
2 de	b Accounting fees	·	129,12	7	0.	0.	129,127
Ш аl-	c Other profession	naitees . BIHI U	125,12	/ •	<u> </u>		125,127
and Administrative Expen		STMT 7	2,26	1	0.	0.	2,261
			71,14	Λ Ι	0.	0.	2,201
		d depletion STMT A	214 94	4 • 0	0.	0.	214,949
E 20		•	214,94	<i>S</i> .	0.	0.	
₹ 21 ₽		ices, and meetings	1,328,20	0.	0.	0.	92 621
	-	am. (m.)	82,63	1.	0.	0.	
perating			2,616,96	9.	0.	0.	2,010,909
24		and administrative	10 202 66	c	Δ	0	10 211 522
0		lines 13 through 23	. 10,282,66		0.	0.	
25	•		1,677,07	<u>v.</u>			1,642,431
26	•	and disbursements.	11 050 74	<u>_</u>	^		11 052 052
	Add lines 24 and		11,959,74	<u>L • </u>	0.	0.	11,853,953
27			0 0 0 7 0 4	<u>_</u>			
27		over expenses and disbursements	2,837,04	<u> </u>	102	<u>+</u>	
		income (if negative, enter -0-)			163.		+
		COME (if negative, enter -0-)		1		54,522.	
223501 01-23-0	3 LHA For Pap	perwork Reduction Act Notice,	see the instructions.				Form 990-PF (200

09410507 758661 47000

	0-PF (2002) KIPP FOUNDATION	Beginning of year		1 <u>362724 Pag</u> vear
art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - nòn-interest-bearing	228,405.	83.	83
2	Savings and temporary cash investments	463,408.	1,136,618.	1,136,618
	Accounts receivable ► 602,651.			
Ŭ	Less allowance for doubtful accounts	346,547.	602,651.	602,651
A	Pledges receivable > 2,100,000.		0027031.	0027033
4	Less allowance for doubtful accounts		2,100,000.	2,100,000
5	Grants receivable		2710070001	
6	Receivables due from officers, directors, trustees, and other			
U				
7	disqualified persons Other notes and loans receivable ► 27,459.			
1	Less allowance for doubtful accounts	5,373.	27,459.	27,45
0			2771333	21/15.
	Inventories for sale or use		193,061.	193,06
9	Prepaid expenses and deferred charges			195,00
	Investments - U S and state government obligations			
	Investments - corporate stock			
	Investments - corporate bonds			······
11	Investments - land, buildings, and equipment basis			
	Less: accumulated depreciation			
	Investments - mortgage loans			
13	Investments - other			
14	Land, buildings, and equipment basis Less accumulated depreciation STMT A 111,664.	120 047	105 277	105 27
		<u>129,047.</u> 29,471.	<u> 195,277.</u> 266,993.	<u> </u>
15	Other assets (describe STATEMENT 9)	25,4/1.	200,993.	200,99
40		1,202,251.	4,522,142.	4,522,14
	Total assets (to be completed by all filers)	779,997.	1,217,003.	4,522,14
17	Accounts payable and accrued expenses	119,991.	34,645.	
18	Grants payable		11,200.	
19	Deferred revenue		11,200.	
20	Loans from officers, directors, trustees, and other disqualified persons			
21	Mortgages and other notes payable			
22	Other liabilities (describe)			
23	Total liabilities (add lines 17 through 22)	779,997.	1,262,848.	
20	Organizations that follow SFAS 117, check here		1/202/0101	
	and complete lines 24 through 26 and lines 30 and 31.			
24	Unrestricted	412 281	877 820	
24 25	Temporarily restricted	412,281. 9,973.	877,820. 2,381,474.	
25 26	· · · · · · · · · · · · · · · · · · ·		2,301,111	
20	Permanently restricted Organizations that do not follow SFAS 117, check here			
	and complete lines 27 through 31.			
27	Capital stock, trust principal, or current funds			
28	Paid-in or capital surplus, or land, bldg., and equipment fund			
29	Retained earnings, accumulated income, endowment, or other funds			
20 20	Total net assets or fund balances	422,254.	3,259,294.	
50		122/231		
31	Total liabilities and net assets/fund balances	1,202,251.	4,522,142.	
art	III Analysis of Changes in Net Assets or Fund Ba	lances		
Tota	i net assets or fund balances at beginning of year - Part II, column (a), line 30			
	st agree with end-of-year figure reported on prior year's return)		1	422.25
	r amount from Part I, line 27a		2	422,25
	er increases not included in line 2 (itemize)		3	2,037,04
	lines 1, 2, and 3		3	3,259,29
	reases not included in line 2 (itemize)		5	51255125
	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	(mn /b) line 20	6	3,259,29
Tota	I NET ASSETS OF TUND DAIANCES AT END OF VEAT (line 4 minus line 5) - Part II. CON	JIIII 101, 108 au		

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Part IV Capital Gains and	FOUNDATION		-		_		4-336	Z / Z 4	Page 3
smitt gopter durid une	Losses for Tax on Inv	vestment	t Income						
(a) List and describe t 2-story brick wareho	he kind(s) of property sold (e.g., use; or common stock, 200 shs	, real estate, MLC Co)		(b) Hov P - P D - D	acquired irchase onation		acquired day, yr)	(d) Dat (mo , da	
A LOSS ON DISPOSAL	OF FIXED ASSES	T			Р				
b									
C									
<u>d</u>									
e(e) Gross sales price	(f) Depreciation allowed		st or other basis	<u> </u>	····		Gain or (loss		
	(or allowable)	plus e	expense of sale			(e) plu	s (f) minus		
<u>a</u> 1,500.	1,346.		3,36	5.				•	<u><519.</u>
<u>b</u>		·							<u> </u>
d			· · ·						
e									
Complete only for assets showing ga	in in column (h) and owned by th	he foundation	n on 12/31/69				Col (h) gain		
(I) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any		C		not less that (from col (
a						_			<519.
<u>b</u>									
<u>c</u>									
<u>d</u>						. .			
8	[
Capital gain net income or (net capital	loss) { If gain, also enter If (loss), enter -0-	in Part I, line	7 }						<519.
Net short-term capital gain or (loss) a									
If gain, also enter in Part I, line 8, colu		u (0)]					
For optional use by domestic private fou	-				tment Ir	icome			
Part V Qualification Und For optional use by domestic private fou if section 4940(d)(2) applies, leave this p Was the organization liable for the section f "Yes," the organization does not qualify	ndations subject to the section 4 art blank n 4942 tax on the distributable ar under section 4940(e) Do not co	1940(a) tax or mount of any complete this	n net investment ir year in the base p part	enod?	tment ir	icome			< <u>519.</u>
Part V Qualification Understructure For optional use by domestic private four f section 4940(d)(2) applies, leave this private four Was the organization liable for the section f "Yes," the organization does not qualify I Enter the appropriate amount in each	ndations subject to the section 4 art blank a 4942 tax on the distributable ar <u>under section 4940(e) Do not cr</u> column for each year, see instru	1940(a) tax or mount of any complete this	n net investment ir year in the base p part	enod?	tment ir			Yes	
Part V Qualification Understructure For optional use by domestic private four f section 4940(d)(2) applies, leave this provide the organization liable for the section Was the organization liable for the section f "Yes," the organization does not qualify I Enter the appropriate amount in each (a) Base period years	ndations subject to the section 4 art blank a 4942 tax on the distributable ar <u>under section 4940(e) Do not cr</u> column for each year, see instru (b)	1940(a) tax or mount of any complete this uctions before	n net investment ir year in the base p part	enod? es (c)			Distril (col (b) div	(d)	X No
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Part V Qualification Understructure For optional use by domestic private four f section 4940(d)(2) applies, leave this provide the organization liable for the section of "Yes," the organization does not qualify I Enter the appropriate amount in each (a) Base period years Calendar year (or tax year beginning in 2001 2000	ndations subject to the section 4 art blank 4942 tax on the distributable ar <u>under section 4940(e) Do not cr</u> column for each year, see instru (b) Adjusted qualifying dist 6, 781 1, 25	1940(a) tax on mount of any complete this uctions before tributions 8,636. 7,111.	n net investment in year in the base p part e making any entri	enod? es (c) nchanta 2,4 5,4	ole-use asse 14,73 01,38	ts 5 • 6 •	Distril (col (b) div	(d) Dution ratio rided by col 2.81 .23	(c)) 13379 27386
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Part V Qualification Understructure For optional use by domestic private fou f section 4940(d)(2) applies, leave this p Mas the organization liable for the section f "Yes," the organization does not qualify I Enter the appropriate amount in each Base period years Calendar year (or tax year beginning in 2001 1999 1998	ndations subject to the section 4 art blank 4942 tax on the distributable ar <u>under section 4940(e) Do not cr</u> column for each year, see instru (b) Adjusted qualifying dist 6, 781 1, 25	1940(a) tax on mount of any complete this uctions before tributions 8,636. 7,111.	n net investment in year in the base p part e making any entri	enod? es (c) nchanta 2,4 5,4	ole-use asse 14,73 01,38	ts 5 • 6 •	Distril (col (b) div	(d) oution ratio ided by col 2.81 .23 1.11	(c)) 13379 27386 76892
Part V Qualification Understructure For optional use by domestic private fou f section 4940(d)(2) applies, leave this p Mas the organization liable for the section f "Yes," the organization does not qualify I Enter the appropriate amount in each (a) Base period years Calendar year (or tax year beginning in 2000 1999 1998 1997 2 Total of line 1, column (d) 3 Average distribution ratio for the 5-ye	ndations subject to the section 4 art blank a 4942 tax on the distributable ar <u>under section 4940(e) Do not co</u> column for each year, see instru (b) Adjusted qualifying dist 6, 785 1, 25 14 14 ar base period - divide the total o	1940(a) tax on mount of any complete this juctions before tributions $\frac{8}{7}, \frac{636}{111}$. 3, 670.	n net investment in year in the base p part a making any entri Net value of no	елоd? es (c) nchanta 2,4 5,4	ble-use asse 14,73 01,38 28,54	ts 5. 6. 2. 2.	Distril (col (b) div	(d) Dution ratio ided by col 2.81 .23 1.11 4.16	(c)) 13379 27386 76892 17657
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Part V Qualification Understructure For optional use by domestic private fou For optional use by domestic private fou f section 4940(d)(2) applies, leave this p Was the organization liable for the section f "Yes," the organization does not qualify Enter the appropriate amount in each (a) Base period years Calendar year (or tax year beginning in 2001 2000 1999 1998 1997 Part of line 1, column (d) Average distribution ratio for the 5-ye the foundation has been in existence	ndations subject to the section 4 art blank a 4942 tax on the distributable ar <u>under section 4940(e) Do not cr</u> column for each year, see instru (b) Adjusted qualifying dist 6, 788 1, 25 14 14 14 14 14 14	1940(a) tax on mount of any complete this juctions before tributions $8, 636 \cdot 7, 111 \cdot 3, 670 \cdot 100$	n net investment in year in the base p part a making any entri Net value of no	елоd? es (c) nchanta 2,4 5,4	ble-use asse 14,73 01,38 28,54	ts 5. 6. 2. 2.	Distril (col (b) div	(d) Dution ratio ided by col 2.81 .23 1.11 4.16	[X] № (c)) 13379 27386 76892 17657 72552
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Part V Qualification Understream For optional use by domestic private fou f section 4940(d)(2) applies, leave this p Mas the organization liable for the section f "Yes," the organization does not qualify I Enter the appropriate amount in each (a) Base period years Calendar year (or tax year beginning in 2001 2000 1999 1998 1997 2 Total of line 1, column (d) 3 Average distribution ratio for the 5-ye the foundation has been in existence in 4 Enter the net value of noncharitable-u 5 Multiply line 4 by line 3	ndations subject to the section 4 art blank a 4942 tax on the distributable ar <u>under section 4940(e) Do not cr</u> column for each year, see instru (b) Adjusted qualifying dist 6, 788 1, 25 14 14 ar base period - divide the total o f less than 5 years se assets for 2002 from Part X, II	1940(a) tax on mount of any complete this juctions before tributions $8, 636 \cdot 7, 111 \cdot 3, 670 \cdot 100$	n net investment in year in the base p part a making any entri Net value of no	елоd? es (c) nchanta 2,4 5,4	ble-use asse 14,73 01,38 28,54	ts 5. 6. 2. 3 4 5	Distril (col (b) div	(d) putton ratio vided by col 2.81 .23 1.11 4.16 1.38 1,399	[X] № (c)) 13379 27386 76892 17657 72552 ,161. ,993.
Part V Qualification Understructure For optional use by domestic private four f section 4940(d)(2) applies, leave this provide for the section for the section for the section for the appropriate amount in each Mass the organization liable for the section for the appropriate amount in each Image: The organization does not qualify for the appropriate amount in each Base period years Calendar year (or tax year beginning in 2001 2001 2000 1999 1998 1997 Parage distribution ratio for the 5-yee the foundation has been in existence in the fourth of the fourth o	ndations subject to the section 4 art blank a 4942 tax on the distributable ar <u>under section 4940(e) Do not cr</u> column for each year, see instru (b) Adjusted qualifying dist 6, 788 1, 25 14 14 ar base period - divide the total o f less than 5 years se assets for 2002 from Part X, II	1940(a) tax on mount of any complete this juctions before tributions $8, 636 \cdot 7, 111 \cdot 3, 670 \cdot 100$	n net investment in year in the base p part a making any entri Net value of no	елоd? es (c) nchanta 2,4 5,4	ble-use asse 14,73 01,38 28,54	ts 5. 6. 2. 2. 3 4 5 6	Distril (col (b) div	(d) putton ratio //ded by col 2.81 .23 1.11 4.16 1.38 1,399 1,940	[X] № (c)) 13379 27386 76892 17657 72552 ,161. ,993. 192.
Part V Qualification Understreet For optional use by domestic private four f section 4940(d)(2) applies, leave this provide for the section for the section for the section for the appropriate amount in each (a) Base period years Calendar year (or tax year beginning in 2001 2000 1999 1998 1997 2 Total of line 1, column (d) 3 Average distribution ratio for the 5-yee the foundation has been in existence in foundation has been in existence in 4 Enter the net value of noncharitable-u Multiply line 4 by line 3 5 Enter 1% of net investment income (1 7 Add lines 5 and 6	ndations subject to the section 4 art blank a 4942 tax on the distributable ar <u>under section 4940(e) Do not cr</u> column for each year, see instru (b) Adjusted qualifying dist 6, 781 1,25 14 ar base period - divide the total of f less than 5 years se assets for 2002 from Part X, II % of Part I, line 27b)	1940(a) tax on mount of any complete this juctions before tributions $8, 636 \cdot 7, 111 \cdot 3, 670 \cdot 100$	n net investment in year in the base p part a making any entri Net value of no	елоd? es (c) nchanta 2,4 5,4	ble-use asse 14,73 01,38 28,54	ts 5. 6. 2. 2. 3 4 5 6 7		(d) pution ratio rided by col 2.81 .23 1.11 4.16 1.38 1,399 1,940 1,941	[X] № (c)) 13379 27386 76892 17657 72552 ,161. ,993. 192. ,185.
Part V Qualification Understreet For optional use by domestic private fou f section 4940(d)(2) applies, leave this p Was the organization liable for the section f "Yes," the organization does not qualify i Enter the appropriate amount in each Base period years Calendar year (or tax year beginning in 2001 2000 1999 1998 1997 2 Total of line 1, column (d) 3 Average distribution ratio for the 5-ye the foundation has been in existence in 4 Enter the net value of noncharitable-u 5 6 Enter 1% of net investment income (1 7 Add lines 5 and 6 8 8 Enter qualifying distributions from Pa	ndations subject to the section 4 art blank a 4942 tax on the distributable ar <u>under section 4940(e) Do not cr</u> column for each year, see instru (b) Adjusted qualifying dist <u>6,783</u> <u>1,255</u> <u>14</u> ar base period - divide the total o f less than 5 years se assets for 2002 from Part X, II % of Part I, line 27b)	1940(a) tax on mount of any complete this juctions before tributions $\frac{8}{, 636}$. 7, 111. 3, 670.	n net investment in year in the base p part making any entri Net value of no	enod? es (c) nchanta 2,4 5,4	ble-use asse 14,73 01,38 28,54	ts 5. 6. 2. 2. 3 4 5 6		(d) putton ratio //ded by col 2.81 .23 1.11 4.16 1.38 1,399 1,940	[X] № (c)) 13379 27386 76892 17657 72552 ,161. ,993. 192. ,185.
Part V Qualification Understructure For optional use by domestic private fou For optional use by domestic private fou f section 4940(d)(2) applies, leave this p Was the organization liable for the section f "Yes," the organization does not qualify I Enter the appropriate amount in each (a) Base period years Calendar year (or tax year beginning in 2000 1999 1998 1997 2 Total of line 1, column (d) 3 Average distribution ratio for the 5-ye	ndations subject to the section 4 art blank a 4942 tax on the distributable ar <u>under section 4940(e) Do not cr</u> column for each year, see instru (b) Adjusted qualifying dist <u>6,783</u> <u>1,255</u> <u>14</u> ar base period - divide the total o f less than 5 years se assets for 2002 from Part X, II % of Part I, line 27b)	1940(a) tax on mount of any complete this juctions before tributions $\frac{8}{, 636}$. 7, 111. 3, 670.	n net investment in year in the base p part making any entri Net value of no	enod? es (c) nchanta 2,4 5,4	ble-use asse 14,73 01,38 28,54	ts 5. 6. 2. 2. 3 4 5 6 7		(d) pution ratio rided by col 2.81 .23 1.11 4.16 1.38 1,399 1,940 1,941	(c)) 13379 27386 76892 17657 72552 ,161. ,993. 192. ,185.

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Form	990-PF (2002) KIPP FOUNDATION		-3362			Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see ir	nstru	ctior	าร)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1		1			
	Date of ruling letter (attach copy of ruling letter if necessary-see instructions)					
b	Domestic organizations that meet the section 4940(e) requirements in Part V, check here 🕨 🚺 and enter 1%	1			1	<u>92.</u>
	of Part I, line 27b					
C	All other domestic organizations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2			_	0.
3	Add lines 1 and 2	3			1	92.
	STATEMENT D	4			1	92.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5				0.
6	Credits/Payments	ſ				
a	2002 estimated tax payments and 2001 overpayment credited to 2002 6a 1,697	•				
b	Exempt foreign organizations - tax withheld at source . 6b					
C	Tax paid with application for extension of time to file (Form 8868)					
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments Add lines 6a through 6d	7			1,6	97.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			1,6	97.
11	Enter the amount of line 10 to be: Credited to 2003 estimated tax	11				97.
Pê	ert VII-A Statements Regarding Activities					
1a	During the tax year, did the organization attempt to influence any national, state, or local legislation or did it participate or interv	ene in			Yes	No
	any political campaign?		ĺ	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	,	[1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials put		or			
	distributed by the organization in connection with the activities.					ł
C	Did the organization file Form 1120-POL for this year?			10		Х
d						[
	(1) On the organization. \blacktriangleright \$ (2) On organization managers. \blacktriangleright \$ O	•				l l
e	Enter the reimbursement (if any) paid by the organization during the year for political expenditure tax imposed on organization	 I			i I	
	managers. \triangleright \$0.				j l	İ.
2	Has the organization engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities.					
3	Has the organization made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	n, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	Ņ	₹\A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
	 By language in the governing instrument or 					ł
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the st	ate law				ĺ
	remain in the governing instrument?			6	X	
7	Did the organization have at least \$5,000 in assets at any time during the year?			7	X	
	If "Yes," complete Part II, col. (c), and Part XV.					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	CALIFORNIA, TEXAS					
b	If the answer is "Yes" to line 7, has the organization furnished a copy of Form 990-PF to the Attorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation			8b	X	ļ
9	Is the organization claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for		w .			
	year 2002 or the taxable year beginning in 2002 (see instructions for Part XIV)? If "Yes," complete Part XIV .STATEME	NT	۵ (g	X	
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	itéwer	T.C	10	X	
11	Did the organization comply with the public inspection requirements for its annual returns and exemption application?			11	Х	L
	Web site address <u>HTTP://WWW.KIPP.ORG/</u>					
12	The books are in care of KIPP FOUNDATION Telephone number of the second				<u>556</u>	
	Located at ► 345 SPEAR ST, STE 510, SAN FRANCISCO, CA	ZIP+	4 ▶ <u>94</u>	105		
13	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	• •		••	. ; - •	·
2225		► <u>13</u>	<u> </u>		/A	
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Form 990-PF (2002) KIPP FOUNDATION	94-3362	724		Page 5
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required				
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a During the year did the organization (either directly or indirectly)				
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
a disqualified person?	Yes X No			
	X Yes 🔲 No			
	X Yes 🛄 No			
(5) Transfer any income or assets to a disqualified person (or make any of either available				
for the benefit or use of a disqualified person)?	Yes X No			
(6) Agree to pay money or property to a government official? (Exception. Check "No"				
If the organization agreed to make a grant to or to employ the official for a period after	<u> </u>			
termination of government service, if terminating within 90 days)	Yes X No			
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations				
section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 19 of the instructions)?		10		X
Organizations relying on a current notice regarding disaster assistance check here				
c Did the organization engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not correct	ted			v
before the first day of the tax year beginning in 2002?		10		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the organization was a private operating four	dation			
defined in section 4942(j)(3) or 4942(j)(5)) ⁻				
a At the end of tax year 2002, did the organization have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) b				
before 2002?	Yes X No			
If "Yes," list the years				
b Are there any years listed in 2a for which the organization is not applying the provisions of section 4942(a)(2) (relating to in valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and				
statement - see instructions)	N/A	26		
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	11/ 21	20		
3a Did the organization hold more than a 2% direct or indirect interest in any business enterprise at any time				
during the year?	Yes X No			
b If "Yes," did it have excess business holdings in 2002 as a result of (1) any purchase by the organization or disqualified per				
May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7				
of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Sched				
Form 4720, to determine if the organization had excess business holdings in 2002.)	N/A	3b		
4a Did the organization invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		Х
b Did the organization make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable	purpose that			
had not been removed from jeopardy before the first day of the tax year beginning in 2002?		4b		X
5a During the year did the organization pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	Yes X No			
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly,				
any voter registration drive?	Yes X No			
(3) Provide a grant to an individual for travel, study, or other similar purposes?	Yes X No			
(4) Provide a grant to an organization other than a charitable, etc., organization described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?	Yes X No			
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for				
the prevention of cruelty to children or animals?	Yes X No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations	27.62			
section 53 4945 or in a current notice regarding disaster assistance (see instructions)?	N/A	5b		
Organizations relying on a current notice regarding disaster assistance check here				
c If the answer is "Yes" to question 5a(4), does the organization claim exemption from the tax because it maintained N_{1}/N_{2}				
expenditure responsibility for the grant? N/A] Yes L No			
If "Yes," attach the statement required by Regulations section 53 4945-5(d).				
6a Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on	Yes X No			
a personal benefit contract?	TES [_A NO	C.		х
b Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If you answered "Yes" to 6b, also file Form 8870.		6b		
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Deart Mill	Information About Officers, Directors, Trustees, Foundation Managers, Highly
Partvill	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

List all officers, directors, trustees, foundation managers and their compensation: (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average hours per week devoted to position (c) Compensation (e) Expense account, other allowances (lf not paid, enter -0-) (a) Name and address 0. 261,888. SEE STATEMENT 10 6,321.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title and ave hours per wee devoted to posit	ek l	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
MATT CANDLER	VP OF SCH	OOL	DEV		
345 SPEAR STREET, SUITE 510	40		120,455.	4,795	•
LISA DAGGS	CHIEF OF	STAF	F		
345 SPEAR STREET, SUITE 510	40		123,467.	4,361	•
JOHN KANBERG	GENERAL C	OUNS	EL		
345 SPEAR STREET, SUITE 510	40		123,379.	3,957	•
MARK MEDEMA	DIR FACIL	ITIE			
345 SPEAR STREET, SUITE 510	40		105,603.	4,203	•
NANCY DEARHAMMER	DIR OF AC	ADEM			
345 SPEAR STREET, SUITE 510	40		104,181.	4,061	
Total number of other employees paid over \$50,000				►	52
3 Five highest-paid independent contractors for professional service	es. If none, enter "I	NONE."			<u> </u>
(a) Name and address of each person paid more than \$50,000			(b) Type of serv	ICO	(c) Compensation
CAMBRIDGE EDUCATION ASSOCIATES					
STATION RD CAMBRIDGE, ENGLAND CB12RS			OL EVALUA		<u>118,253.</u>
NANCY EUSKE			RUCTIONAL		
PO BOX 4736, CARMEL, CA 93921		SERV	ICES FOR	FELLOWS	<u>112,025.</u>
VINSON & ELKINS					
2300 FIRST CITY TOWER, HOUSTON, TX 77	002	LEGA	L SERVICE	S	<u>79,183.</u>
D2F2 FOUNDATION		PROF	ESSIONAL		
345 SPEAR ST., SUITE 510, SAN FRANCIS	SCO	SERV	ICES		228,000.
DAVID LEVIN		EDUC	ATIONAL		
164 EAST 33RD ST. #18, NEW YORK, NY 1	.0016	CONS	ULTING		88,188.
Total number of others receiving over \$50,000 for professional services				. ►	4
Part IX-A Summary of Direct Charitable Activities					
Part IA-A Summary of Direct Chamable Activities					

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the Expenses number of organizations and other beneficiaries served, conferences convened, research papers produced, etc 1 SEE STATEMENT B 11,169,230. 3 ______ _____

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Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
a	 ······
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	0.

Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out chantable, etc , purposes		<u></u>
	Average monthly fair market value of securities	1a	
	Average of monthly cash balances	1b	1,420,468.
	Fair market value of all other assets	10	
-	Total (add lines 1a, b, and c)	1d	1,420,468.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
	Acquisition indebtedness applicable to line 1 assets	2	0.
	Subtract line 2 from line 1d	3	1,420,468.
	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	21,307.
	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,399,161.
	Minimum investment return. Enter 5% of line 5	6	69,958.
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations ar foreign organizations check here X and do not complete this part)	,	
1	Minimum investment return from Part X, line 6		
2a	Tax on investment income for 2002 from Part VI, line 5 . 2a	1	
b	Income tax for 2002 (This does not include the tax from Part VI)		
C	Add tines 2a and 2b	20	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4a	Recoveries of amounts treated as qualifying distributions		
b	Income distributions from section 4947(a)(2) trusts		
C	Add lines 4a and 4b	40	
5	Add lines 3 and 4c	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
Pa	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	<u>11,853,953.</u> 0.
b	Program-related investments - Total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes	2	142,462.
3	Amounts set aside for specific charitable projects that satisfy the		
8	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	11,996,415.
5	Organizations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b	5	192.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	11,996,223.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether th 4940(e) reduction of tax in those years	e foundal	tion qualifies for the section

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2001	(c) 2001	(d) 2002
1 Distributable amount				
for 2002 from Part XI, line 7				0.
2 Undistributed income, if any, as of the end of 2001				
a Enter amount for 2001 only			0.	
b Total for prior years				
' ·		0.		
3 Excess distributions carryover, if any, to 2002				
a From 1997				
b From 1998				
c From 1999				
d From 2000				^
e From 2001	0.			
1 Total of lines 3a through e	•••			
4 Qualifying distributions for 2002 from Part XII, line 4 ► \$N/A				
a Applied to 2001, but not more than line 2a			0.	
b Applied to undistributed income of prior				······
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	ο.			
d Applied to 2002 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions canvover applied to 2002	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income Subtract	-	0		
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.	,	
e Undistributed income for 2001. Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2002 Subtract				
lines 4d and 5 from line 1 This amount must				
be distributed in 2003				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	0			
section 170(b)(1)(E) or 4942(g)(3)	0.			
8 Excess distributions carryover from 1997	0			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2003. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9			1	
a Excess from 1998				
b Excess from 1999				
c Excess from 2000				
d Excess from 2001				
e Excess from 2002		<u> </u>	1	<u>I</u>

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Form 990-PF (2002) KIPP FC	UNDATION			94-336	2724 Page 9
Part XIV Private Operating F	oundations (see ins	structions and Part VII-	A, question 9)		
1 a If the foundation has received a ruling of	or determination letter that	it is a private operating		<u> </u>	
foundation, and the ruling is effective for	or 2002, enter the date of t	he ruling			
b Check box to indicate whether the orga		-	in section	4942(j)(3) or 494	2(1)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part 1 or the minimum	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
investment return from Part X for				·	<u>_</u>
each year listed	54.522.	65,752,	106.939.	0.	227.213.
b 85% of line 2a	54,522.	65,752. 55,889.	<u> 106,939.</u> <u> 90,898</u> .	0.	<u>227,213.</u> 193,131.
c Qualifying distributions from Part XII,					
line 4 for each year listed	11,996,415.	6.789.294	1,257,111.	143.670.2	0,186,490.
d Amounts included in line 2c not	11/330/413.	011031234.	1/23//1110		.0/100/490.
used directly for active conduct of	0.	Ο.	ο.	0.	0.
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities	11 006 415	6 700 201	1 257 111	142 670 0	0 196 400
Subtract line 2d from line 2c Gomplete 3a, b, or c for the alternative test relied upon a "Assets" alternative test - enter. (1) Value of all assets	11,996,415.	0,789,294.	1,257,111.	143,670.2	0.
(2) Value of assets qualifying under section 4942(I)(3)(B)(I)					0.
b "Endowment" alternative test - Enter 2/3 of minimum investment return shown in Part X, line 6 for each year	46 620	80 401	190 046	845.	20.9 021
listed	46,639.	80,491.	180,046.	045.	308,021.
 c "Support" alternative test - enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) 					0.
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(1)(3)(B)(11)					0.
(3) Largest amount of support from		·····			
an exempt organization					0.
(4) Gross investment income					0.
Part XV Supplementary Info	ormation (Comple	te this part only	f the organizatio	n had \$5.000 or m	ore in assets
at any time during				······································	
1 Information Regarding Foundation a List any managers of the foundation with	on Managers:			oundation before the close	
year (but only if they have contributed				oundation before the close	o lany lan
SEE STATEMENT 11					
b List any managers of the foundation w other entity) of which the foundation ha			or an equally large portio	n of the ownership of a pai	rtnership or
NONE					
2 Information Regarding Contribut Check here ► X if the organization			-	not accept unsolicited rem	uests for funds. If
the organization makes gifts, grants, et	to (see instructions) to ind	lividuals or organizations	under other conditions, c	omplete items 2a, b, c, and	bt
a The name, address, and telephone num	nber of the person to who	m applications should be	addressed	· · · · · · · · ·	
N/A					
b The form in which applications should $\underline{N/A}$	be submitted and informa	tion and materials they sh	iould include		
c Any submission deadlines N/A					
d Any restrictions or limitations on award N/A	ds, such as by geographic	al areas, charitable fields,	kinds of institutions, or o	ther factors	
223581/01-23-03	<u>~</u> ~~				Form 990-PF (2002)

Part XV Supplementary Informati 3 Grants and Contributions Paid During the		Payment		
Recipient	If recipient is an individual,			
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
KIPP SCHOOLS		501(C)(3)	EDUCATION	1,642,431
Total	l		<u> </u>	3a 1,642,43
b Approved for future payment KIPP SCHOOLS		501(C)(3)	EDUCATION	34,64
Total	I	- I	 ▶	3b 34,64

09410507 758661 47000 · 2002.09000 KIPP FOUNDATION

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelate	d business income		ded by section 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a SERVICE FEES					35,359.
b					
C					
d	-	-			
8					٥
t					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	19,163.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					······································
6 Net rental income or (loss) from personal					
property					-
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	<519.	>
9 Net income or (loss) from special events			_		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b					
C					
d	_		_		
e	-		_	10 (14	25 250
12 Subtotal Add columns (b), (d), and (e)		0	•	18,644.	
13 Total. Add line 12, columns (b), (d), and (e)				13	54,003.
(See worksheet in line 13 instructions to verify calculations)					
Part XVI-B Relationship of Activities	to the Acco	omplishment of l	Exemp	t Purposes	

Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)					plishment of					
							PURPOSE	OF	THE	ORGANIZATION
					 				· · · · · - · - · - · - · - · - · - · -	
							· · · · · · · · · · · · · · · · · · ·			
						<u> </u>				
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223611					 					Form 990-PF (2002)

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_ . . _ _ _ _

Pa	art X	Information Re Exempt Organ		Transfers To and Transaction	ons and Relationships With Noncha	iritable	e	
1	Did th	e organization directly or indi	rectly engage	in any of the following with any other org	anization described in section 501(c) of		Yes	No
				tions) or in section 527, relating to politica				
а	•			oncharitable exempt organization of	5			
	(1) (1a(1)	1	X
	• •	Other assets				1a(2)		X
b	• •	Transactions						
_		sales of assets to a noncharita	ble exempt o	roanization		1b(1)]	X
		Purchases of assets from a no				1b(2)		X
		Rental of facilities, equipment,				1b(3)	-	X
(4) Reimbursement arrangements						1b(4)		X
	• •	oans or loan guarantees				1b(5)		X
		Performance of services or me	mbership or	fundraising solicitations		1b(6)		X
C				ner assets, or paid employees		10		X
d		•	-		ould always show the fair market value of the goods,	other as	sets,	
		•			narket value in any transaction or sharing arrangeme			
	colun	nn (d) the value of the goods,	other assets,	, or services received				
(a) L	ine no	(b) Amount involved	(c) Narr	ne of noncharitable exempt organization	(d) Description of transfers, transactions, and s	haring ar	rangem	ients
				N/A				
					_			
		, .						
			-					
		<u> </u>		······				
22	ls the	organization directly or indire	ectly affiliated	with, or related to, one or more tax-exem	pt organizations described			
				n 501(c)(3)) or in section 527?	[Yes	[X	No
b		s," complete the following sch			-			
		(a) Name of organization		(b) Type of organization	(c) Description of relation	ship		
	-			N/A				
	Under p	enalties of penjury, I declare that I i	ave examined	this return, including accompanying schedules ar	nd statements, and to the best of my knowledge and belief, it is	s true, com	ect	
	and cor	npiete Declaration of pleparer (oth		ror fiduciary) is based on all information of which	preparer has any knowledge			
	.	Inchael	<u>* D</u>	anerger "				
Sign Here	SI	gnature of officer or trustee		<i>0</i>				
L L	s _	Preparer's	n	Malore				
ŝ	p e z	signature						
	Paid Preparer's Use Only	Firm's name (or yours HOOD		RONG LLP, CPAS				
	ξź			STREET, SUITE ISCO, CA 94105				
		autors, and zir coor SAIN	r RANC.	1300, CA 34103				

223621 01-23-03 Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury

Internal Revenue Service

Schedule of Contributors

Supplementary Information for line 1 of Form 990, 990-EZ, and 990-PF (see instructions) OMB No 1545-0047

2002

Employer identification number

94-3362724

Name of organization

KIPP	FOUNDATION	

O	roan	ization	type	(check	one)
-	ryan	12011011	Gpe	(CHECK	QUIC)

Filers of:	Section:
Form 990 or 990-EZ	501(c)() (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	X 501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule. (Note: Only a section 501(c)(7), (8), or (10) organization can check box(es) for both the General Rule and a Special Rule-see instructions.)

General Rule-

X For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules-

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of crueity to children or animals. (Complete Parts I, II, and III.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.)

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 1 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ Schedule B (Form 990, 990-EZ, or 990-PF) (2002)

223451 01-23-03

Name of organization

Page 1 to 4 of Part I

Employer identification number

KIPP FOUNDATION

94-3362724

Part I · Contributors (See Specific Instructions.)

FOLT .	Contributors (see Specific Instructions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	J.R. HYDE SR. FAMILY FOUNDATION 6075 POPLAR AVE. STE 335 MEMPHIS, TN 38119	\$12,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	NFL CHARITIES 280 PARK AVENUE NEW YORK, NY, 10017	\$50,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	U.S. DEPARTMENT OF EDUCATION 400 MARYLAND AVENUE SW WASHINGTON D.C., 20202-0498	\$863,708.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4	D2F2 FOUNDATION 345 SPEAR STREET, SUITE 510 SAN FRANCISCO, CA 94105	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5	BILL & MELINDA GATES FOUNDATION PO BOX 23350 SEATTLE, WA 98102	\$378,013.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
223452 01-2	THE WALTON FAMILY FOUNDATION, INC. PO BOX 2030 BENTONVILLE, AR 72712-2030 3-03	\$1,200,000.	Person X Payroll Noncash (Complete Part II if there Is a noncash contribution.) 990, 990-EZ, or 990-PF) (2002)
410507	14 260661 47000 2002 00000 KIDD F		47000 1

09410507 758661 47000

Name of organization

Page 2 to 4 of Part I

Employer identification number

94-3362724

KIPP FOUNDATION

Part I Contributors (See Specific Instructions.)

	(b)	(c)	(ď)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
7	NATIONAL GEOGRAPHIC SOCIETY EDUCATION FOUNDATION1145 17TH STREET, NWWASHINGTON D.C., 20036-4688	\$200,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
8	MEMPHIS CITY SCHOOL DISTRICT 2597 AVERY AVENUE MEMPHIS, TENNESSEE 38112	\$287,003.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
9	ANNIE E. CASEY FOUNDATION 701 ST. PAUL STREET BALTIMORE, MD 21202	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
10	THE LOUISE & CLAUDE ROSENBERG JR. FAMILY FOUNDATION 2465 PACIFIC AVE SAN FRANCISCO, CA 94115	\$ <u>10,000</u> .	Person X Payroll Noncash (Complete Part II if there
10 	FAMILY FOUNDATION 2465 PACIFIC AVE		Person X Payroll Noncash (Complete Part II if there
(a)	FAMILY FOUNDATION 2465 PACIFIC AVE SAN FRANCISCO, CA 94115 (b)	\$(c)	Person X Payroll Noncash (Complete Part II if there Is a noncash contribution.) (d) Type of contribution Person X Payroll Noncash (Complete Part II if there
(a) No.	FAMILY FOUNDATION 2465 PACIFIC AVE SAN FRANCISCO, CA 94115 (b) Name, address, and ZIP + 4 KIPP INC. 10711 KIPP WAY	\$ 10,000. (c) Aggregate contributions	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution Person X Payroll Noncash (Complete Part II if there
(a) No. 11 (a)	FAMILY FOUNDATION 2465 PACIFIC AVE SAN FRANCISCO, CA 94115 (b) Name, address, and ZIP + 4 KIPP INC. 10711 KIPP WAY HOUSTON, TX 77099 (b)	\$ <u>10,000</u> . (c) Aggregate contributions \$ <u>10,000</u> . (c)	Person X Payroll Noncash (Complete Part II if there Is a noncash contribution.) (d) Type of contribution Person X Payroll Noncash (Complete Part II if there Is a noncash contribution.) (d)

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Name of organization

3 to 4 of Part I Page

Employer identification number

94-3362724

KIPP FOUNDATION

Part I . Contributors (See Specific Instructions.)

(a) (b) (c) (c) (c) (c) No. WILLIAM C. MCIVOR C/O SCHWAB FUND FOR Type of contributions Type of contribution 13 CHARITABLE GIVING \$ 10,000. 101 MONTGOMERY STREET \$ 10,000. SAN FRANCISCO, CA 94104 \$ Monesah [] (a) (b) (c) (d) (a) (b) (c) (d) (b) (c) (d) Monesah [] (c) (c) (d) Nonesah [] (c) (d) Nonesah [] (c) (d) Name, address, and 2P + 4 Aggregate contributions Type of contribution (d) Name, address, and 2P + 4 Aggregate contributions Type of contribution (d) Name, address, and 2P + 4 Aggregate contributions Type of contribution (d) Name, address, and 2P + 4 Aggregate contributions Type of contribution (d) Name, address, and 2P + 4 Aggregate contributions Type of contribution (d) Name, address, and 2P + 4 Aggregate contributions Type of contribution (d) Name, address, and 2P + 4 Aggregate contributions Type of contribution (d) Name, address, and 2P + 4				
WILLIAM C. MCTUOR C/O SCHWAB FUND FOR CHARITABLE GIVING Person X Porein 13 CHARITABLE GIVING \$	(a) No	(b) Name address and ZID + 4	(C) Aggregate contributions	(d) Type of contribution
101 MONTGOMERY STREET \$ 10,000. SAN FRANCISCO, CA 94104 Secondary Contribution (a) (b) (b) Name, address, and ZIP + 4 (c) Name, address, and ZIP + 4 (c) CHARISMA FUND-LUCY R. SPRAGUE MEMORIAL, FIDELITY INV. CHARITABLE GIFT FUND 82 DEVONSHIRE STREET BOSTON, MA 02109 \$ 10,000. (c) Name, address, and ZIP + 4 Aggregate contributions Payroll (c) Name, address, and ZIP + 4 Aggregate contributions Person (c) Name, address, and ZIP + 4 Aggregate contributions (c) (d) Name, address, and ZIP + 4 Aggregate contributions Person (d) Name, address, and ZIP + 4 Aggregate contributions Person (d) Name, address, and ZIP + 4 Aggregate contributions S _ 25,000. (d) Name, address, and ZIP + 4 Aggregate contributions Ype of contribution (d) Name, address, and ZIP + 4 Aggregate contributions S _ 5,000. (d) Name, address, and ZIP + 4 </td <td></td> <td>WILLIAM C. MCIVOR C/O SCHWAB FUND FOR</td> <td>Aggregate contributions</td> <td></td>		WILLIAM C. MCIVOR C/O SCHWAB FUND FOR	Aggregate contributions	
SAN FRANCISCO, CA 94104 is a nonceash contribution.) (a) Name, address, and ZIP + 4 Aggregate contributions (b) CHARISMA FUND-LUCY R. SPRAGUE MEMORIAL, Person X (c) CHARISMA FUND-LUCY R. SPRAGUE MEMORIAL, Person X (a) CHARISMA FUND-LUCY R. SPRAGUE MEMORIAL, Person X (a) BOSTON, MA 02109 s 10,000. (b) Monceash Conceash contribution (c) Name, address, and ZIP + 4 Aggregate contributions (b) Name, address, and ZIP + 4 Aggregate contributions (c) Name, address, and ZIP + 4 Aggregate contributions 110 BROADWAY, SUITE 230 s 25,000. (b) Name, address, and ZIP + 4 Aggregate contributions Person X (c) (d) Type of contribution Person X Payroll (d) Name, address, and ZIP + 4 Aggregate contributions Complete Part II fibrer is a nonceash contribution (d) Name, address, and ZIP + 4 Aggregate contributions Complete Part II fibrer is a nonceash contribution (d) Name, address, and ZIP + 4 Aggregate contributions Payroll <td></td> <td>101 MONTGOMERY STREET</td> <td>\$10,000.</td> <td></td>		101 MONTGOMERY STREET	\$10,000.	
No. Name, address, and ZIP +4 Aggregate contributions Type of contribution 14 FIDELITY INV. CHARITABLE GIFT FUND \$		SAN FRANCISCO, CA 94104		
14 FIDELITY INV. CHARITABLE GIFT FUND \$ 10,000. Person \$ 82 DEVONSHIRE STREET \$ 10,000. Person \$ 80 DEVONSHIRE STREET \$ 10,000. Person \$ 80 Noneash (Complete Part II of there is a noncash contribution) (Complete Part II of there is a noncash contribution) (d) 15 SAN ANTONIO AREA FOUNDATION \$ 25,000. Person X 10 BROADWAY, SUITE 230 \$ 25,000. Person Person Person (Complete Part II of there is a noncash contribution) (a) Name, address, and ZIP + 4 Aggregate contributions Person (Complete Part II of there is a noncash contribution) (b) Name, address, and ZIP + 4 Aggregate contributions Person (Complete Part II of there is a noncash contribution) 16 CHRIS LEHANE \$ 5,000. (contribution) Noncash (Complete Part II of there is a noncash contribution) 17 MARK FABIANI \$ 5,000. (contribution) Noncash (Complete Part II of there is a noncash contribution) (b) No. Name, address, an		Name, address, and ZIP + 4		
82 DEVONSHIRE STREET \$ 10,000. Noncesh [] BOSTON, MA 02109 (a) (b) (c) (a) Name, address, and ZIP + 4 Aggregate contributions Type of contribution 15 SAN ANTONIO AREA FOUNDATION \$ 25,000. Person [X] 110 BROADWAY, SUITE 230 \$ 25,000. Noncesh [] (complete Part II fithere is a noncesh contribution] (a) Name, address, and ZIP + 4 Aggregate contributions Type of contribution] (b) Name, address, and ZIP + 4 Aggregate contributions Type of contribution (c) Name, address, and ZIP + 4 Aggregate contributions Type of contribution (c) Name, address, and ZIP + 4 Aggregate contributions (complete Part II fithere is a noncesh contribution] (a) Name, address, and ZIP + 4 Aggregate contributions (Complete Part II fithere is a noncesh contribution] (b) Name, address, and ZIP + 4 Aggregate contributions Type of contribution (c) Name, address, and ZIP + 4 Aggregate contributions (complete Part II if there is a noncesh contribution] (a) Name, address, and ZIP + 4 Aggregate contributions Type of contribution] <td< td=""><td>14</td><td>· · · ·</td><td></td><td></td></td<>	14	· · · ·		
BOSTON, MA 02109 is a noncesh contribution.) (a) (b) Aggregate contributions 15 SAN ANTONIO AREA FOUNDATION Person 110 BROADWAY, SUITE 230 \$		82 DEVONSHIRE STREET	\$10,000.	Noncash
No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 15 SAN ANTONIO AREA FOUNDATION s 25,000. Person		BOSTON, MA 02109		
110 BROADWAY, SUITE 230 \$25,000. PayrollNonceshComplete Part II fithere is a noncesh contribution.) (a) (b) (c) (c) (c) 16 CHRIS LEHANE Person X Person X Person X 628 LAKE STREET \$				
110 BROADWAY, SUITE 230 \$	15	SAN ANTONIO AREA FOUNDATION		
SAN ANTONIO, TX 78205 Is a noncash contribution.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 16 CHRIS LEHANE person X 628 LAKE STREET \$		110 BROADWAY, SUITE 230	\$25,000.	Noncash
No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 16 CHRIS LEHANE \$		SAN ANTONIO, TX 78205		
628 LAKE STREET \$				
628 LAKE STREET \$.,		
SAN FRANCISCO, CA 94118 Is a noncash contribution.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 17 MARK FABIANI Person X 6002 BEAUMONT AVE \$	No.	Name, address, and ZIP + 4		Type of contribution
No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 17 MARK FABIANI Person X 6002 BEAUMONT AVE \$	No.	Name, address, and ZIP + 4 CHRIS LEHANE	Aggregate contributions	Type of contribution Person X Payroll Noncash
6002 BEAUMONT AVE \$	No.	Name, address, and ZIP + 4 CHRIS_LEHANE 628_LAKE_STREET	Aggregate contributions	Type of contribution Person X Payroll
6002 BEAUMONT AVE \$	<u>No.</u> <u>16</u> (a)	Name, address, and ZIP + 4 CHRIS LEHANE 628 LAKE STREET SAN FRANCISCO, CA 94118 (b)	Aggregate contributions \$5,000. (c)	Type of contribution Person Payroll Noncash (Complete Part II if there Is a noncash contribution.) (d)
LA JOLLA, CA 92037 Is a noncash contribution.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 18 GOLDSBURY FOUNDATION Person X Payroll P.O. BOX 460567 \$ 142,000. Payroll Oncash SAN ANTONIO, TX 78246 Other to P (form 000 COD ET) (CODD) Other to P (form 000 COD ET) (CODD)	No. 16 (a) No.	Name, address, and ZIP + 4 CHRIS LEHANE 628 LAKE STREET SAN FRANCISCO, CA 94118 (b) Name, address, and ZIP + 4	Aggregate contributions \$5,000. (c)	Type of contribution Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution Person X
No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 18 GOLDSBURY FOUNDATION Person X P.O. BOX 460567 \$ 142,000. Payroll SAN ANTONIO, TX 78246 Other to P (Sum 200 - E)	No. 16 (a) No.	Name, address, and ZIP + 4 CHRIS LEHANE 628 LAKE STREET SAN FRANCISCO, CA 94118 (b) Name, address, and ZIP + 4 MARK FABIANI	Aggregate contributions \$5,000. (c) Aggregate contributions	Type of contribution Person X Payroll Image: Complete Part II if there is a noncash contribution.) (d) Type of contribution Person X Payroll Image: Complete Part II if there is a noncash contribution.) (d) Type of contribution Person X Payroll Image: Complete Part II if there is a noncash contribution
P.O. BOX 460567 \$ 142,000. Payroll SAN ANTONIO, TX 78246 \$ 000 F2 write	No. 16 (a) No.	Name, address, and ZIP + 4 CHRIS LEHANE 628 LAKE STREET SAN FRANCISCO, CA 94118 (b) Name, address, and ZIP + 4 MARK FABIANI 6002 BEAUMONT AVE	Aggregate contributions \$5,000. (c) Aggregate contributions	Type of contribution Person X Payroll Image: Complete Part II if there is a noncash contribution.) (d) Type of contribution Person X Payroll Image: Complete Part II if there Operation X Person X Payroll Image: Complete Part II if there (Complete Part II if there X
P.O. BOX 460567 \$ 142,000. Noncash SAN ANTONIO, TX 78246 \$ 000 F3 moncash contribution.)	No. 16 (a) No. 17 (a)	Name, address, and ZIP + 4 CHRIS LEHANE 628 LAKE STREET SAN FRANCISCO, CA 94118 (b) Name, address, and ZIP + 4 MARK FABIANI 6002 BEAUMONT AVE LA JOLLA, CA 92037 (b)	Aggregate contributions $ \begin{array}{c} $	Type of contribution Person X Payroll Image: Complete Part II if there Is a noncash contribution.) (d) Type of contribution Person X Payroll Image: Complete Part II if there Noncash Image: Complete Part II if there Is a noncash contribution.) (d) (d) Complete Part II if there Is a noncash contribution.) (d)
SAN ANTONIO, TX 78246 Is a noncash contribution.)	No. 16 (a) No. 17 (a) No.	Name, address, and ZIP + 4 CHRIS LEHANE 628 LAKE STREET SAN FRANCISCO, CA 94118 (b) Name, address, and ZIP + 4 MARK FABIANI 6002 BEAUMONT AVE LA JOLLA, CA 92037 (b) Name, address, and ZIP + 4	Aggregate contributions $ \begin{array}{c} $	Type of contribution Person X Payroll Image: Complete Part II if there is a noncash contribution.) (d) Type of contribution Person X Payroll Image: Complete Part II if there is a noncash contribution Person X Payroll Image: Complete Part II if there is a noncash contribution.) (d) Type of contribution (d) Type of contribution (d) Type of contribution Payrol X Payrol X
Pakadula D / Falsa 000 000 57 000 05/ /0000)	No. 16 (a) No. 17 (a) No.	Name, address, and ZIP + 4 CHRIS LEHANE 628 LAKE STREET SAN FRANCISCO, CA 94118 (b) Name, address, and ZIP + 4 MARK FABIANI 6002 BEAUMONT AVE LA JOLLA, CA 92037 (b) Name, address, and ZIP + 4 GOLDSBURY FOUNDATION	Aggregate contributions \$5,000. (c) Aggregate contributions \$5,000. (c) Aggregate contributions	Type of contribution Person X Payroll Image: Complete Part II if there Is a noncash contribution.) (d) (d) Type of contribution Person X Payroll Image: Complete Part II if there Is a noncash Image: Complete Part II if there Is a noncash Image: Complete Part II if there Is a noncash Image: Complete Part II if there Is a noncash Image: Complete Part II if there Is a noncash Image: Complete Part II if there Is a noncash Image: Complete Part II if there Is a noncash Image: Complete Part II if there Is a noncash Image: Complete Part II if there Is a noncash Image: Complete Part II if there Image: Complete Part II if there Image: Complete Part II if there Image: Complete Part II if there Image: Complete Part II if there Image: Complete Part II if there Image: Complete Part II if there Image: Complete Part II if there Image: Complete Part II if there Image: Complete Part II if there Image: Complete Part II if there Image: Complete Part II if there Image: Complete Par

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Name of organization

Page 4 to 4 of Part I

Employer	identification	number
=		

94-3362724

KIPP FOUNDATION

Part I . Contributors (See Specific Instructions.)

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
19	A.R. TOWNSEND SR., JANICE T. TOWNSEND 200 PATTERSON AVE # 810 SAN ANTONIO, TX 78209-6268	\$25,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
20	KINDER FOUNDATION P.O. BOX 130776 HOUSTON, TX 77219-0776	\$50,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
21	THE WILLIAM AND FLORA HEWLETT FOUNDATION 2121 SAND HILL ROAD MENLO PARK, CA 94025	\$20,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
22	JOSEPH DROWN FOUNDATION 1999 AVENUE OF THE STARS, SUITE 1930 LOS ANGELES, CA 90067	\$50,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
23	DAGNY MAIDMAN 770 RHODE ISLAND SAN FRANCISCO, CA 94107	\$5,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
223452 01-2	23-03	\$ Schedule B (Form	Person Payroli Noncash (Complete Part II if there Is a noncash contribution.) 990, 990-EZ, or 990-PF) (2002)

FORM 990-PF	G.	AIN OR (LO	SS) FR	OM SALE	OF	ASSEI	'S		STAT	EME	NT	
												1
(A) DESCRIPTION OF	PROPERTY					MANNE ACQUIR		DAT ACQUI		DAT	E S	OLD
LOSS ON DISPOS	AL OF FIX	- ED ASSET			P	URCHAS	ED -					
GR	B) OSS PRICE	(C) COST OR OTHER BAS		(D) EXPENSE SALE		DE	(E) CPREC	•	· (GAIN	(F) OR	LOS	S
	1,500.	3,	365.		0	•	1,34	<u> </u>			<5	19.>
TOTAL TO FORM	<u> </u>			MPORARY	CA	SH INV	/ESTM	= ENTS	STAT	reme	NT	2
SOURCE									<i>I</i>	AMOU	NT	
INTEREST INCOM	Έ								19,163.			63.
TOTAL TO FORM	990-PF, P	ART I, LIN	ЕЗ,С	COLUMN A	L					1	9,1	63.
FORM 990-PF			OTHER	INCOME					STAT	reme	NT	3
									-	MOI	חזא	
DESCRIPTION									ł	AMOU	IN T	
DESCRIPTION SERVICE FEES											5,3	59.

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FORM 990-PF	LEGAL	FEES	S1	ATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL	126,638.	0.	0.	126,638.
TO FM 990-PF, PG 1, LN 16A =	126,638.	0.	0.	126,638.
FORM 990-PF	ACCOUNTI	NG FEES	SI	PATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	28,450.	0.	0.	28,450.
TO FORM 990-PF, PG 1, LN 16B	28,450.	0.	0.	28,450.
			······································	
FORM 990-PF 0	OTHER PROFES	SIONAL FEES	SI	FATEMENT 6
FORM 990-PF	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D)
	(A) EXPENSES	(B) NET INVEST-	(C) ADJUSTED	(D) CHARITABLE PURPOSES
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE
DESCRIPTION 	(A) EXPENSES PER BOOKS 129,127.	(B) NET INVEST- MENT INCOME 0. 0.	(C) ADJUSTED NET INCOME 0. 0.	(D) CHARITABLE PURPOSES 129,127.
DESCRIPTION OTHER PROFESSIONAL TO FORM 990-PF, PG 1, LN 16C	(A) EXPENSES PER BOOKS 129,127. 129,127.	(B) NET INVEST- MENT INCOME 0. 0.	(C) ADJUSTED NET INCOME 0. 0.	(D) CHARITABLE PURPOSES 129,127. 129,127.
DESCRIPTION OTHER PROFESSIONAL TO FORM 990-PF, PG 1, LN 16C FORM 990-PF	(A) EXPENSES PER BOOKS 129,127. 129,127. TAX (A) EXPENSES	(B) NET INVEST- MENT INCOME 0. 0. 0. 0. (B) NET INVEST-	(C) ADJUSTED NET INCOME 0. 0. 0. C. ADJUSTED	(D) CHARITABLE PURPOSES 129,127 129,127 129,127 TATEMENT (D) CHARITABLE

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 STATEMENT(S) 4, 5, 6, 7

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. KIPP FOUNDATION

94-3362724

FORM 990-PF	OTHER E	XPENSES	S1	ATEMENT 8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
HOUSING	135,235.	0.	0.	135,235.
INSTRUCTION	43,072.	0.	0.	43,072.
MATERIALS AND SUPPLIES	9,222.	0.	0.	9,222.
SCHOOL HOSTING	44,600.	0.	0.	44,600.
MISCELLANEOUS	31,919.	0.	0.	31,919.
OPERATIONS CONSULTING	1,402,345.	0.	0.	1,402,345.
MARKETING SUPPLIES AND	1,402,343.	0.	0.	1,402,545.
ADVERTISEMENT	109,065.	0.	0.	109,065.
FELLOW RECRUITMENT	4,138.	0.	0.	4,138.
NETWORK AND SCHOOL AWARDS	2,000.	0.	0.	2,000.
NATIONAL PROGRAMS: STUDENT	2,000.	0.	0.	2,000.
LEADERS	7,983.	0.	0.	7,983.
PAYROLL TAXES	376,215.	0.	0.	376,215.
TELECOMMUNICATIONS	190,092.	0.	0.	190,092.
BANK CHARGES	1,706.	0.	0.	1,706.
COMPUTERS AND SOFTWARE	13,796.	0.	0.	13,796.
DUES AND SUBSCRIPTIONS	26,711.	0.	0.	26,711.
EQUIPMENT RENTAL	18,684.	0.	0.	18,684.
UTILITIES	3,638.	0.	0.	3,638.
INSURANCE	22,394.	0.	0.	22,394.
LICENSES, PERMITS AND FEES	822.	0.	Ο.	822.
OFFICE SUPPLIES	55,482.	0.	0.	55,482.
REPAIRS AND MAINTENANCE	4,861.	0.	0.	4,861.
PAYROLL PROCESSING FEES	7 , 385.	0.	0.	7,385.
POSTAGE AND DELIVERY	51,617.	0.	0.	51,617.
EMPLOYEE EXPENSES	11,814.	0.	0.	11,814.
OTHER SCHOOL EXPENSES	18,066.	0.	0.	18,066.
BAD DEBT EXPENSE	6,287.	0.	0.	6,287.
KIPP PROF DEV SERVICES	15,820.	0.	0.	15,820.
NATIONAL PROGRAMS: STAPLES	2,000.	0.	0.	2,000.
TO FORM 990-PF, PG 1, LN 23	2,616,969.	0.	0.	2,616,969.

FORM 990-PF	OTHER ASSETS		STATEMENT 9
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
DEPOSIT NOTES RECEIVABLE		32,876. 234,117.	32,876. 234,117.
TOTAL TO FORM 990-PF, PART II, I	INE 15	266,993.	266,993.

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94-3362724

FORM	990-PF	
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PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS STATEMENT 10

NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
DONALD G. FISHER 345 SPEAR STREET, SUITE 510 SAN FRANCISCO, CA 94105	DIRECTOR/CHAIRM 1	LAN 0.	0.	0.
DORIS F. FISHER 345 SPEAR STREET, SUITE 510 SAN FRANCISCO, CA 94105	DIRECTOR 1	0.	0.	0.
MICHAEL H. FEINBERG 345 SPEAR STREET, SUITE 510 SAN FRANCISCO, CA 94105	CEO/DIRECTOR 55 HOURS	158,827.	6,321.	0.
SCOTT HAMILTON 345 SPEAR STREET, SUITE 510 SAN FRANCISCO, CA 94105	PRESIDENT 1	0.	0.	0.
JANE SPRAY 345 SPEAR STREET, SUITE 510 SAN FRANCISCO, CA 94105	SECRETARY/TREAS 1	URER 0.	0.	0.
DAVID LEVIN 345 SPEAR STREET, SUITE 510 SAN FRANCISCO, CA 94105	VICE PRESIDENT 1	0.	0.	0.
(DAVID LEVIN WAS PAID A FEE OF CONSULTING)	\$88,188 FOR EDU 0.	CATIONAL 0.	0.	0.
SHAWN HURWITZ 345 SPEAR STREET, SUITE 510 SAN FRANCISCO, CA 94105	DIRECTOR 1	0.	0.	0.
JOHN J. FISHER 345 SPEAR STREET, SUITE 510 SAN FRANCISCO, CA 94105	DIRECTOR 1	0.	0.	0.
MICHAEL BUERGER 345 SPEAR STREET, SUITE 510 SAN FRANCISCO, CA 94105	CFO 55 HOURS	103,061.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	- PART VIII	261,888.	6,321.	0.

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FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS

94-3362724

STATEMENT	1	.1
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. NAME OF MANAGER

DONALD G. FISHER DORIS F. FISHER

KIPP Foundation EIN: 94-3362724 June 30, 2003

Property, plant and equipment consist of the following at June 30, 2003:

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Computer Equipment Office Equipment Improvements	\$ 233,894 57,026 16,021
Total Less accumulated depreciation	 306,941 111,664
Property, plant and equipment - net	\$ 195,277

Depreciation expense for the year ended June 30, 2003 totaled \$71,144.

STATEMENT A

Summary of Direct Charitable Activities:

The KIPP Foundation promotes and enhances effective public education at low income public schools (including, specifically, charter schools) through the development of curriculum, training of school executives, facilitation of the sharing of information by schools and school executives, assistance to others in establishing new, and establishment of a national network of highly effective low income schools, initially at the elementary and middle school level. This is done by first recruiting outstanding educators to lead future KIPP schools. KIPP then operates a multi-faceted, three-year program of training, school evaluation, and financial and operational support. Although KIPP has continuously expanded and refined its Leadership Program in response to the emerging needs of its schools, the core functions of the KSLP include the following:

<u>Training</u>. Development and delivery of numerous training events, including the formal classroom program, residencies, and "school leader boot camp;" ongoing regional training programs; school leader credentialing; "Team & Family" training events for school leaders, teachers, office managers, directors and students; and organizational knowledge management operations.

<u>Evaluation</u>. Coordination of school inspections, which can trigger financial awards to their educational programs, including initial visits, pre-inspections, programmatic recommendations and documentation.

<u>Instructional Leadership</u>. "Post graduate" training for KIPP schools, including support in the areas of standards & curriculum; instructional methods and materials; categorical funding programs; student assessment / data driven instruction.

<u>Organizational Leadership</u>. Training and school support in development of community relations programs; school culture; accountability and compliance; parent engagement and staff relations; media relations; school governance; board management.

<u>Operational Leadership</u>. Support of the business and financial aspects of school operations; formal and informal training with respect to planning and management, procurement, systems & procedures, facilities and facility management.

STATEMENT B

Kipp Foundation EIN: 94-3362724 June 30,2003

Form 990-PF, Part VII-A, Question #10

D2F2 Foundation 345 Spear Street, Suite 510 San Francisco, CA 94105

The Walton Family Foundation, Inc. PO Box 2030 Bentonville, AR 72712-2030 KIPP Foundation EIN: 94-3362724 June 30, 2003

The KIPP Foundation is in a 60-month termination under section 507(b)(1)(B). The IRS has issued a determination which indicates that the KIPP Foundation will be treateed as a public charity described in sections 509(a)(1) and 170(b)(1)(ii) of the Code for an advance ruling period of 60 months beginning July 1, 2002.

Attached to this return is Form 872 "Consent to Extend the Time to Assess Tax." Accordingly, the Foundation is not required to pay the excise tax.

Based on the IRS instructions for a 60-month termination, the Foundation is completing this return as if it were still a private operating foundation.

STATEMENT D

Form 886	B (12-2000)	Page 2
	are filing for an Additional (not automatic) 3-Month Extension, complete only Part II and	check this box
	ly complete Part II if you have already been granted an automatic 3-month extension o	n a previously filed Form 8868.
If you Part II	are filing for an Automatic 3-Month Extension, complete only Part I (on page 1). Additional (not automatic) 3-Month Extension of Time - Must file	Original and One Conv
<u></u>	Name of Exempt Organization	Employer identification number
Type or		
print. File by the	KIPP FOUNDATION	94-3362724
extended due date for	Number, street, and room or suite no. If a P.O. box, see instructions. 345 SPEAR STREET, NO. 510	For IRS use only
filing the return See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. SAN FRANCISCO, CA 94105-1657	
	rpe of return to be filed (File a separate application for each return):	
		n 1041-A L Form 5227 L Form 8870 n 4720 Form 6069
STOP: D	o not complete Part II if you were not already granted an automatic 3-month extension	on a previously filed Form 8868.
 If the c 	organization does not have an office or place of business in the United States, check this bo	×
	is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	
box 🕨	. If it is for part of the group, check this box and attach a list with the names a	nd EINs of all members the extension is for
4 ire	equest an additional 3-month extension of time until MAY 17, 2004	
		ind ending JUN 30, 2003
		I return Change in accounting period
	ate in detail why you need the extension	MATION NECESSARY TO
	REPARE A COMPLETE AND ACCURATE TAX RETURN.	INTION RECEIVERNI 10
8a lft	his application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less nrefundable credits. See instructions	sany \$ 0.
b ift	his application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and es	
tax	eviously with Form 8868	
	lance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required upon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructi	
	Signature and Verification	
Under pei	nalties of perjury, I declare that I have examined this form, including accompanying schedules and stater	nents, and to the best of my knowledge and belief,
it is true, (correct, and complete, and that I am authorized to prepare this form.	
Signature	► Susan M Mat Title ► CPA	Date 7/13/04
5	Notice to Applicant - To Be Completed by the	ne IRS
	e have approved this application. Please attach this form to the organization's return.	the later of the date shows below or the due
	e have not approved this application. However, we have granted a 10-day grace period from te of the organization's return (including any prior extensions). This grace period is consider	
oti	te of the organization's return (including any prior extensions). This grace period is consider nerwise required to be made on a timely return. Please attach this form to the organization's a have not approved this application. After considering the reasons stated in item 7, we can	return.
🗔 w	e have not approved this application. After considering the reasons stated in item 7, we can	not grant your request for an extension of the to
file	We are not granting the 10-day grace period. cannot consider this application because it was filed after the due date of the return for was a solution.	FEB 27 and
	e cannot consider this application because it was filed after the due date of the return for w her	
<u> </u>		LINDA WEISKOPF, FIELD DIRECTOR, SUBMISSION PROCESSING, OGDEN.
	By	
Director		
	e Mailing Address - Enter the address if you want the copy of this application for an addition that the one entered above.	
	Name HOOD & STRONG LLP, CPAS	
Type or print	Number and street (include suite, room, or apt. no) Or a P.O. box number 60 SPEAR STREET, SUITE 400	
223832 05-22-02	City or town, province or state, and country (including postal or ZIP code) SAN FRANCISCO, CA 94105	
		Form 8868 (12-2000)

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(Decer Departm	8868 nber 2000) ent of the Treasury Revenue Service	Application for Extension of Time To File an Exempt Organization Return File a separate application for each return.	OMB No. 1545-1709
• If yo	ou are filing for an Add Do not complete Par	omatic 3-Month Extension, complete only Part I and check this box litional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this for t II unless you have already been granted an automatic 3-month extension on a prev c 3-Month Extension of Time - Only submit original (no copies needed)	
All oth	er corporations (includ	ions requesting an automatic 6-month extension - check this box and complete Part I on ling Form 990-C filers) must use Form 7004 to request an extension of time to file income Cs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066	tax
Type of print			imployer identification number
File by t due date filing you	for Number, street,	NDATION and room or suite no. If a P.O. box, see instructions. R STREET, NO. 510	94-3362724
return S Instructi	ons City, town or po	st office, state, and ZIP code. For a foreign address, see instructions. CISCO, CA $94105 - 1657$	
• If tt	is is for a Group Retu	Form 990-T (corporation) Form 4720 Form 990-T (sec. 401(a) or 408(a) trust) Form 5227 Form 990-T (trust other than above) Form 1041-A Form 1041-A Form 8870 Form enter the organization's four digit Group Exemption Number (GEN) If this is t of the group, check this box	7 9 0
	to file the exempt orga	c 3-month (6-month, for 990-T corporation) extension of time until FEBRUARY anization return for the organization named above. The extension is for the organization's or aning JUL 1, 2002 , and ending JUN 30, 2003 ess than 12 months, check reason: Initial return Final return	
3a	If this application is fo nonrefundable credits	r Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	<u>\$</u> 0.
		r Form 990-PF or 990-T, enter any refundable credits and estimated nclude any prior year overpayment allowed as a credit \dots	<u>\$</u> 1,697.
		ict line 3b from line 3a. Include your payment with this form, or, if required, deposit with F , by using EFTPS (Electronic Federal Tax Payment System). See instructions	TD0.
		Signature and Verification	

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature
Signature
Signature
CPA
LHA For Paperwork Reduction Act Notice, see instruction

Date 11/17/03 Form 8868 (12-2000)

223831 05-01-02