### DLN: 93491219006577

### **Return of Private Foundation** or Section 4947(a)(1) Trust Treated as Private Foundation

Department of the Treasury Inte

Form 990-PF

▶ Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052 2015

Inter	nal Reve	► Information about Form 990	-PF and	its instructions is at	www.irs.gov/fori		pen to Public Inspection
For	cale	ndar year 2015, or tax year beginning	9 05-0	1-2015	, and ending 0		'
	e of fou opleWork				<b>A Employer Ide</b> 46-5604812	entification numbe	er
		street (or P O box number if mail is not delivered to street way Street	address)	Room/suite	<b>B</b> Telephone nun (650) 814-2070	nber (see instruction	s)
		, state or province, country, and ZIP or foreign postal code ty, CA 94063			C If exemption	application is pendin	g, check here
	neck al	ll that apply   Initial return   Initial retu	rn of a fo	ormer public charity	D 1 Foreign or	ganizations, check h	ere 🕨
	Teek u	Final return Amended  Address change Name chai	return	Timer public ename,	<b>2.</b> Foreign or test, check	ganizations meeting c here and attach co	the 85% mputation
		ype of organization			under section	ndation status was t 507(b)(1)(A), ched	
<b>I</b> Fai of	r marke year <i>(fi</i>	4947(a)(1) nonexempt charitable trust Other et value of all assets at end from Part II, col (c),  \$\delta\$ 9,884,752  \$\delta\$ DA ccounting met of the column (c)  \$\delta\$ Political (c), Part I, column (c)	thod cify) _	Cash 🗸 Accrua	F If the founda	tion is in a 60-mont i 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may necessarily equal the amounts in column (a) (see instructions))	not	Revenue and expenses per (a) books	Net investment (b) income	Adjusted net	Disbursements for charitable purposes (d) (cash basis only)
	1	Contributions, gifts, grants, etc , received (atta	ch				
		schedule)		6,463,600			
	2	Check ► ☐ If the foundation is <b>not</b> required to attach  Sch B					
	3	Interest on savings and temporary cash invest	ments				
	4	Dividends and interest from securities					
	5a	Gross rents	[				
۵.	ь	Net rental income or (loss)					
Ĕ	6a	Net gain or (loss) from sale of assets not on lin	e 10	386,679			
Revenue	ь	Gross sales price for all assets on line 6a 670,303					
_	7	Capital gain net income (from Part IV, line 2).	F		670,303		
	8	Net short-term capital gain				С	)
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	ь	Less Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
_	12	Total.Add lines 1 through 11		6,850,279	670,303	C	
	13	Compensation of officers, directors, trustees, e	tc	241,293	24,129	C	217,164
	14	Other employee salaries and wages	F	203,259	0	C	<u> </u>
6S	15	Pension plans, employee benefits		10,482	0	C	· · · · · · · · · · · · · · · · · · ·
ens	16a	Legal fees (attach schedule)	L	17,821	1,782	C	· ·
Expenses	Ь	Accounting fees (attach schedule)	L	1,508	754	C	
	С	Other professional fees (attach schedule)	[	10,633	0	C	37,510
atıv	17	Interest					
Str	18	Taxes (attach schedule) (see instructions)	· · · · -	321,015	0	С	33,268
<u> </u>	19	Depreciation (attach schedule) and depletion .					
<b>Administrative</b>	20	Occupancy	- F	12,718	0	C	<u> </u>
and A	21	Travel, conferences, and meetings		44,797	0	С	43,861
	22	Printing and publications		<b>26.</b> ] 44.055	4.601		47.010
Sun	23	Other expenses (attach schedule)		41,057	1,601	C	47,818
perating	24	Total operating and administrative expenses.		004 502	20.266	C	620.764
<u>a</u>	25	Add lines 13 through 23		904,583	28,266	C	630,764

904,583

5.945.696

Subtract line 26 from line 12

25

27

а

b

Contributions, gifts, grants paid . . . . . .

Total expenses and disbursements. Add lines 24 and

Excess of revenue over expenses and disbursements

**Net investment income** (if negative, enter -0-) Adjusted net income(If negative, enter -0-)

28,266

642,037

0

630,764

0

Pa	rt II	<b>Balance Sheets</b> Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year		End of	
			(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash—non-interest-bearing	355,944	633	3,180	633,180
	2	Savings and temporary cash investments			$\dashv$	
	3	Accounts receivable ►34,298				
		Less allowance for doubtful accounts ▶		34	1,298	34,298
	4	Pledges receivable ▶				
		Less allowance for doubtful accounts ▶			$\dashv$	
	5	Grants receivable			$\dashv$	
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)			$\rightarrow$	
	7	Other notes and loans receivable (attach schedule)				
		Less allowance for doubtful accounts ▶			$\dashv$	
S	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges	2,100	10	0,144	10,144
As	10a	Investments —U S and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)			$\dashv$	
	С	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis ▶				
		Less accumulated depreciation (attach schedule) ▶				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)	3,327,254	9,207	7,130	9,207,130
	14	Land, buildings, and equipment basis 🕨				
		Less accumulated depreciation (attach schedule) ▶				
	15	Other assets (describe ►)				
	16	<b>Total assets</b> (to be completed by all filers—see the				
		ınstructions Also, see page 1, item I)	3,685,298	9,884	⊦,752	9,884,752
	17	Accounts payable and accrued expenses	35,643	1	L,494	
۰.	18	Grants payable				
ties	19	Deferred revenue				
直	20	$Loans\ from\ officers,\ directors,\ trustees,\ and\ other\ disqualified\ persons$				
Liabilities	21	Mortgages and other notes payable (attach schedule)				
_	22	,	109,068	396	5,975	
	23	<b>Total liabilities</b> (add lines 17 through 22)	144,711	398	3,469	
S		Foundations that follow SFAS 117, check here ▶				
Fund Balance		and complete lines 24 through 26 and lines 30 and 31.				
lan	24	Unrestricted				
ၕ	25	Temporarily restricted				
pu	26	Permanently restricted				
F		Foundations that do not follow SFAS 117, check here				
ō		and complete lines 27 through 31.				
ets	27	Capital stock, trust principal, or current funds	0		0	
Assets	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0		0	
t A	29	Retained earnings, accumulated income, endowment, or other funds	3,540,587	9,486		
Net	30	<b>Total net assets or fund balances</b> (see instructions)	3,540,587	9,486		
	31	Total liabilities and net assets/fund balances(see instructions)	3,685,298	9,884	+,752	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances				
1		Total net assets or fund balances at beginning of year—Part II, column	(a), line 30 (must ag	jree		
		, , , , , , , , , , , , , , , , , , , ,			₩	3,540,587
2		Enter amount from Part I, line 27a			ــــــــــــــــــــــــــــــــــــــ	5,945,696
3		Other increases not included in line 2 (itemize) ▶		3	₩	0
4		Add lines 1, 2, and 3			$\downarrow$	9,486,283
5		Decreases not included in line 2 (itemize) ▶		5_	ـــــــ	0
6		Total net assets or fund balances at end of year (line 4 minus line $5$ )—I	Part II, column (b), lı	ne 30 . <b>6</b>		9,486,283

	0-PF (2015)								Page <b>3</b>
Part I	V Capital Gains	and Lo	sses for Tax on Inv	estm	ent Income		.1		<del> </del>
			d(s) of property sold (e g or common stock, 200 s			How acquire P—Purchase ( <b>b</b> ) D—Donation	e (c) (m	ate acquired no , day, yr )	Date sold (d) (mo , day, yr )
1a	See Additional Data	Table							
b									
d									
е									
			Depreciation allo	wed	Cost	or other basis	_	Gair	or (loss)
(e)	) Gross sales price		(f) (or allowable)			expense of sale			(f) minus (g)
a	See Additional Data	Table							
b									
С									
d									
е									
Cor	mplete only for assets s	showing	gaın ın column (h) and ov	vned by	the foundation	on 12/31/69		Gains (Col	(h) gain minus
	FM V as of 12/31/69		A djusted basi			ess of col (ı)	T co	ol (k), bût no	ot less than -0-) <b>or</b>
			<b>(j)</b> as of 12/31/69	9	(k) over	col (j), if any	(1)	Losses	(from col (h))
а	See Additional Data	Table							
b									
С									
d									
e									
2	Capital gain net incoi	me or (n	et capital loss)			n Part I, line 7 in Part I, line 7	2		670,303
3	Net short-term capita	al gaın o	or (loss) as defined in sec	tions 12	222(5) and (6)				
	If gain, also enter in l in Part I, line 8 .	Part I, lı	ne 8, column (c) (see ins	truction	s) If(loss), er	nter -0-	}   3		0
Part \	V Qualification U	Jnder	Section 4940(e) for	Redu	ced Tax on	Net Investm		come	0
		orivate f	oundations subject to the						
			in 4942 tax on the distrib y under section 4940(e)				period?		┌ Yes 🗸 No
			ach column for each year,				tries		
	(a)							(d)	
	period years Calendar	Adju	(b) sted qualifying distributions	Net	(c) value of nonchan	table-use assets	,	Distributio col (b) divided	n ratio
year (o	or tax year beginning in) 2014		180,02	7		1,732,311		cor (b) divided	0 103923
	2013		100,02	<del></del>		1,732,311			0 103723
	2012								
	2011								
	2010								
2	Totalof line 1, column	n (d)					2		0 103923
3	Average distribution	ratio for	the 5-year base period—	dıvıde t	he total on line	e 2 by 5, or by	_		
_	•		dation has been in existe		•	F	3		0 103923
4			arıtable-use assets for 20		,		4		9,981,698
	Multiply line 4 by line	23					5		1,037,328
5						Г			
6	Enter 1% of net inves		ncome (1% of Part I, line	•		L	6		6,420
	Enter 1% of net invest Add lines 5 and 6.		ncome (1% of Part I, line				6 7 8		6,420 1,043,748 630,764

	990-PF (2015) <b>t VI</b> Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(b)	940(e), or 4948—see page 18 of the	instructio		age <b>4</b>
1a	Exempt operating foundations described in section 4940(d)(2), check here			,	
10	and enter "N/A" on line 1				
	Date of ruling or determination letter	}			
	(attach copy of letter if necessary-see instructions)	[]			
b	Domestic foundations that meet the section 4940(e) requirements in Part V,	J <del></del>		1.	2,841
	here ▶ ☐and enter 1% of Part I, line 27b · · · · · · · · · · · · ·				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organiza	ations enter 4% of			
_	Part I, line 12, col (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable four enter -0-)	adations only Others			0
3	Add lines 1 and 2			1.	2,841
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable four	ndations only Others			
	enter -0-)	4			0
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3 If zero or less, e	nter -0 5		1.	2,841
6	Credits/Payments				
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a			
Ь	Exempt foreign organizations—tax withheld at source	6b			
С	Tax paid with application for extension of time to file (Form 8868)	6c			
d	Backup withholding erroneously withheld	6d			
7	Total credits and payments Add lines 6a through 6d				0
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form				291
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> .			1	3,132
10	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amoun	· _ <del>                                   </del>			
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	Refunded 11			
	t VII-A Statements Regarding Activities			l	
<b>1</b> a	During the tax year, did the foundation attempt to influence any national, state	-		Yes	No
			. 1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for p		41.		N-
	for definition)?		1b		No
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities published or distributed by the foundation in connection with the activities	and copies of any materials			
с	Did the foundation file <b>Form 1120-POL</b> for this year?		1c		No
	Enter the amount (if any) of tax on political expenditures (section 4955) impos				-110
-	(1) On the foundation $\blacktriangleright$ \$ 0 (2) On foundation managers	- ·			
e	Enter the reimbursement (if any) paid by the foundation during the year for poli				
	on foundation managers $\blacktriangleright$ \$0				
2	Has the foundation engaged in any activities that have not previously been rep	ported to the IRS?	. 2		No
	If "Yes," attach a detailed description of the activities				_
3	Has the foundation made any changes, not previously reported to the IRS, in it	ts governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conf	formed copy of the changes	. 3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more d	luring the year?	. 4a		No
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?		. 4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction du	ring the year?	. 5		No
	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 49	45) satisfied either			
	By language in the governing instrument, or			]	
	By state legislation that effectively amends the governing instrument so th	at no mandatory directions	J	] .	]
	that conflict with the state law remain in the governing instrument?		. 6		No
7	Did the foundation have at least $$5,000$ in assets at any time during the year	PIf "Yes," complete Part II, col (c),			
	and Part XV		. 7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered ( $% \left( 1\right) =\left( 1\right) \left( 1\right)$	see instructions)			
	►CA				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99	· ·			
	General (or designate) of each state as required by General Instruction G? If		<b>8</b> b	Yes	
9	Is the foundation claiming status as a private operating foundation within the i				
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (s	ee instructions for Part XIV)?		V	
10	If "Yes," complete Part XIV  Did any persons become substantial contributors during the tax year? If "Yes,"	" attach a schedulo licture their names	. 9	Yes	_
10	and addresses	-		Yes	

Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ▶www rippleworks org			
14	The books are in care of ▶John Carroll  Telephone no ▶(415)	706-	7220	
	Located at ▶ 513 Choke Canyon Lane Georgetown TX ZIP+4 ▶ 78628			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here		▶ □	-
	and enter the amount of tax-exempt interest received or accrued during the year	•		
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over		Yes	No
10	a bank, securities, or other financial account in a foreign country?	16	163	No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial		<u> </u>	-110
	Accounts (FBAR) If "Yes", enter the name of the foreign country ▶			
Par	t VIII-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
<b>1</b> a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes Vo			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		į į	
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?    ▼Yes ▼ No		İ	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?   Ves No	İ	i i	
	(5) Transfer any income or assets to a disqualified person (or make any of either available		j i	
	for the benefit or use of a disqualified person)? Yes Vo			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		i i	
	if the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days ) Yes 🗸 No			
b	If any answer is "Yes" to 1a(1)-(6), did <b>any</b> 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 instructions)?	1b		No
	Organizations relying on a current notice regarding disaster assistance check here			
	Г	i		ı
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
_	that were not corrected before the first day of the tax year beginning in 2015?	<b>1</b> c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
_	and 6e, Part XIII) for tax year(s) beginning before 2015? Yes Vo			
	If "Yes," list the years > 20, 20, 20		i i	
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?	 		
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, <b>(2)</b> the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	If the foundation had excess business holdings in 2015 )	3b		
<b>4</b> a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation 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 2015?	4b		No

-CI	Statements R	egarun	ng Activities for	WI	ich Form 4/20	мау	Be Required (Con	CIII	uea)		
5a	During the year did the found	atıon pay	or incur any amount	t to							
	(1) Carry on propaganda, or	otherwise	e attempt to influence	e leg	ıslatıon (section 494	45(e	))?	<b>▽</b> №	lo		
	(2) Influence the outcome of		. ,		• •		•				
	on, directly or indirectly,					•	,	• •	i		
	(3) Provide a grant to an indi	vidual foi	r travel, study, or oth	ner sı	ımılar purposes?		☐ Yes	<b>▽</b> N	lo		ļ
	(4) Provide a grant to an organic in section 4945(d)(4)(A)				· -			<b>▽</b> №	lo		
	(5) Provide for any purpose of educational purposes, or			•				·			
h	If any answer is "Yes" to 5a(						1 .00		10   	i	¦
b	Regulations section 53 4945						·		5b		
	Organizations relying on a cu		-	_			· ·	_			
с	If the answer is "Yes" to que	,	• •		•			I			
	tax because it maintained ex	penditure	e responsibility for th	ie gra	ant?	•	· · · · · T Yes	┌ <b>,</b>	lo	ļ	ļ
	If "Yes," attach the statement	required i	by Regulations section	n 53	4945-5(d)						
<b>6</b> a	Did the foundation, during the		•	•	.,	pren	niums on				
	a personal benefit contract?.			•		٠	· · · Tes	<b>▽</b> N	lo	!	ļ
b	Did the foundation, during the	e year, pa	y premiums, directly	orı	ndırectly, on a perso	nal b	penefit contract?	•	6b		No
_	If "Yes" to 6b, file Form 8870										
7a	At any time during the tax ye				•		1 100		i	!	
b	If yes, did the foundation rec			•					7b	<u> </u>	
Par	t VIII and Contractor		ficers, Directors	i, II	ustees, Founda	tioi	n Managers, Highly	/ Pa	ila Em	pioye	es,
1	List all officers, directors, tru		undation managers a	nd t	heir compensation (s	see i	nstructions).				
			Title, and average	(c)	Compensation( <b>If</b>		(d)		_		
	(a) Name and address		hours per week	` ′	not paid, enter	e	Contributions to mployee benefit plans	10	Exper e) other	ise acc allowa	
		(Б)	devoted to position		-0-)		deferred compensation				
	Galen		sident/CEO		224,712		16,58	1			0
	Broadway Street vood City, CA 94063	40 (	30								
	ian Larsen	Sec	retary/Treasurer		0		(				0
	Broadway Street vood City, CA 94063	1 00	• • • • • • • • • • • • • • • • • • • •								
2	Compensation of five highest	-paid emp	ployees (other than t	hose	e included on line 1—	see	instructions). If none, e	ente	r "NONE	."	
	(a)		Title, and avera	age			Contributions to employee benefit		Evner	ise acc	ount
Nan	ne and address of each emplor more than \$50,000	yee paid	hours per wee <b>(b)</b> devoted to posi		(c) Compensatio	n	plans and deferred  (d) compensation	(	e) other		
Prad	eep Suthram		Director of Product		158,	401	5,23:	1			0
	Broadway Street vood City, CA 94063		40 00								
			1								
								$\perp$			
									_		
								$\perp$			
Tot al	I number of other employees in	aid over	¢ 5 0 0 0 0				▶	1			0

Form 990-PF (2015)	water Foundation Management Highly	Page 7
Part VIII Information About Officers, Directors, T and Contractors (continued)	rustees, roundation managers, highly	Paid Employees,
3 Five highest-paid independent contractors for professional sen	vices (see instructions). If none, enter "NONE".	
(a) Name and address of each person paid more than \$50,000	<b>(b)</b> Type of service	(c) Compensation
NONE	-	
		0
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities	<u> </u>	0
List the foundation's four largest direct chantable activities during the tax year. Inclorganizations and other beneficiaries served, conferences convened, research pape	ude relevant statistical information such as the number of	Expenses
1RIPPLEWORKS BELIEVES IN A WORLD WHERE INNOVATIVE SUSTAINABLE SOCIAL CHANGE TO ADDRESS THE WORLD POVERTY, LACK OF FINANCIAL INCLUSION, CLEAN WATER OUR MISSION IS TO ACCELERATE THE SUCCESS OF SOCIES  S TOUGHEST CHALLENGES, INCLUDING R, HEALTHCARE & ACCESS TO ELECTRICITY AL ENTERPRISES WORKING TO DEVELOP DUND THE WORLD BY PROVIDING EXPERTISE IN THEIR COUNTRY HAVE SEEN OMISING SOCIAL ENTERPRISES TO SOLVE R EXPERTS, THE PROJECTS ARE SHORT TERM S TO DRIVE SOCIAL AND ECONOMIC NTEER THEIR TIME, RIPPLEWORKS PAYS FOR ES ALL THE PROJECT SUPPORT SO THE	630,764	
Part IX-B Summary of Program-Related Investme	nts (see instructions)	
Describe the two largest program-related investments made by the foundation	during the tax year on lines 1 and 2	A mount
1		
2		
All other program-related investments See instructions		
Total. Add lines 1 through 3		0

#### Form 990-PF (2015) Page 8 Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes 1a 9,665,315 1h 440.122 Fair market value of all other assets (see instructions). . . . . . . . . . . . . . . . 1c 28,267 1d 10,133,704 Reduction claimed for blockage or other factors reported on lines 1a and 1e 2 2 3 10.133.704 3 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4 152,006 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 5 5 9.981.698 499,085 **Distributable Amount** Part XI (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations check here **\rightarrow** and do not complete this part.) 1 1 Tax on investment income for 2015 from Part VI, line 5. . . . . . 2a Income tax for 2015 (This does not include the tax from Part VI). . . 2c 3 Distributable amount before adjustments Subtract line 2c from line 1. . . . . . . . . . . . . . . . 3 4 4 5 5 6 6 7 **Distributable amount** as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . . Part XII **Qualifying Distributions** (see instructions) 1 A mounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . . . . . . . . . 1a 630,764 1b 2 A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2 Amounts set aside for specific charitable projects that satisfy the За 3b

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

5

630,764

630,764

Ŀ	Undistributed Income (see ins	tructions)			
		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	Distributable amount for 2015 from Part XI, line 7	Corpus	rears prior to 2014	2014	2013
	Undistributed income, if any, as of the end of 2015				
	Enter amount for 2014 only				
	Total for prior years 20, 20, 20				
	Excess distributions carryover, if any, to 2015	-			
	From 2010				
b	From 2011	7			
c	From 2012				
d	From 2013				
е	From 2014				
	<b>Total</b> of lines 3a through e				
4	Qualifying distributions for 2015 from Part XII, line 4  \$				
а	Applied to 2014, but not more than line 2a				
	Applied to undistributed income of prior years				
Ī	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2015 distributable amount				
	Remaining amount distributed out of corpus				
	Excess distributions carryover applied to 2015				
	(If an amount appears in column (d), the				
	same amount must be shown in column (a) )				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b	Prior years' undistributed income Subtract				
_	line 4b from line 2b				
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				
d	Subtract line 6c from line 6b Taxable amount —see instructions				
_	Undistributed income for 2014 Subtract line				
_	4a from line 2a Taxable amount—see				
	instructions				
f	Undistributed income for 2016 Subtract				
	lines 4d and 5 from line 1 This amount must be distributed in 2015				
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election may				
۰	be required - see instructions) Excess distributions carryover from 2010 not				
٥	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016.				
	Subtract lines 7 and 8 from line 6a				
	Analysis of line 9				
	Excess from 2011	-			
	Excess from 2012	-			
	Excess from 2013 Excess from 2014	-			
	Excess from 2015	1			
_		1	1 1		1

_	m 990-PF (2015) Part XIV Private Operating Foundate	tione (see instruc	tions and Dart \	VII-A question	۵۱	Page <b>10</b>
	If the foundation has received a ruling or determ				<del>)</del>	2014 05 01
	foundation, and the ruling is effective for 2015,		-			2014-05-01
	Check box to indicate whether the organization		ng foundation des		<b>√</b> 4942(j)(3) or	4942(j)(5)
<b>2</b> d	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year (a) 2015	<b>(b)</b> 2014	Prior 3 years (c) 2013	(d) 2012	(e) Total
	investment return from Part X for each	(a) 2013	( <b>b)</b> 2014	(6) 2013	( <b>d)</b> 2012	0
b	year listed	0	0	0	0	0
	Qualifying distributions from Part XII,			_	-	
	line 4 for each year listed	630,764	108,027	0	0	738,791
d	A mounts included in line 2c not used directly for active conduct of exempt activities	0	0	0	0	0
е						
	for active conduct of exempt activities	630,764	108,027	o	o	738,791
3	Subtract line 2d from line 2c Complete 3a, b, or c for the			-		
-	alternative test relied upon					
a	"Assets" alternative test—enter					
	(1) Value of all assets					0
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b						
	of minimum investment return shown in	332,723	57,744	o	0	390,467
_	Part X, line 6 for each year listed	332,723	37,744	Ü	0	350,407
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(j)(3)(B)(iii)					0
	(3) Largest amount of support					
	from an exempt organization					0
	(4) Gross investment income  Int XV Supplementary Information (4)	Complete this n	art only if the	organization	had #E 000 o	
LC	assets at any time during the			: Organization	11au \$5,000 U	i illore ili
1 a	Information Regarding Foundation Managers: List any managers of the foundation who have o	_		contributions rece	erved by the found	ation
	before the close of any tax year (but only if the	y have contributed m	nore than \$5,000	) (See section 50	7(d)(2))	
	Christian Larsen					
	List any managers of the foundation who own 10	1% or more of the st	ock of a corporati	ion (or an equally	large portion of the	
_	ownership of a partnership or other entity) of wh			, , ,	arge porcion or an	-
	Total control of Department of Control of Co					
2	Information Regarding Contribution, Grant, Gif	•				
	Check here ▶ ✓ If the foundation only makes of unsolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, and of	n makes gifts, grants				
_	other conditions, complete items Ea, b, e, and	-				
а	The name, address, and telephone number or e	mail address of the	person to whom a	pplications should	d be addressed	
ь	The form in which applications should be subm	itted and information	n and materials th	ney should include		
_	Any submission deadlines					
	Any submission deadlines					

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Total .

Page **11** Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or status of A mount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year 0 **b** Approved for future payment

nter gross	s amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	512, 513, or 514	(e) Related or exemp
<b>L</b> Progran	n service revenue	(a) Business code	<b>(b)</b> A mount	(c) Exclusion code	(d) A mount	function income (See instructions)
a						·
f						
	and contracts from government agencies rship dues and assessments					
Interes	st on savings and temporary cash ments					
	nds and interest from securities					
	ntal income or (loss) from real estate					
	financed property ebt-financed property					
Net rer	ntal income or (loss) from personal ty					
	nvestment income					
	r (loss) from sales of assets other than ory			18	386,679	
	ome or (loss) from special events				000,012	
Gross	profit or (loss) from sales of inventory					
• Other r	evenue <b>a</b> _					
b						
	al Add columns (b), (d), and (e).		0		386,679	
	dd line 12, columns (b), (d), and (e) Yorksheet in line 13 instructions to verify			1		386,679
art XV	-B Relationship of Activities to	the Accom	plishment of E	xempt Purpos	es	
ine No. ▼	Explain below how each activity for whithe accomplishment of the foundation's instructions )					

orm 990-PF <b>Part XVII</b>	<u> </u>	 egardinç	y Trai	nsfers T	o and Trans	actions	and Relationships With		Рa	ge <b>13</b>
I. Did the ex	Noncharitable							$\overline{}$	I	
section 50	01(c) of the Code (other						er organization described in on 527, relating to political		Yes	No
organizati		adation to		hamtable e	wampt aranna	ation of				
	from the reporting four				, ,			12(1)		No
• •								1a(1) 1a(2)		No
<b>b</b> Other tran								14(2)		140
		rıtable exe	empt or	rganizatior	1			1b(1)		No
• •	nases of assets from a		•	-				1b(2)		No
• •	al of facilities, equipme							1b(3)		No
(4) Reim	bursement arrangemer	nts						1b(4)		No
<b>(5)</b> Loans	s or loan guarantees.							1b(5)		No
(6)Perforr	mance of services or m	embership	or fun	draising s	olicitations			1b(6)		No
: Sharing of	facilities, equipment,	mailing lis	ts, oth	er assets,	or paid employ	ees		1c		No
of the goo	ds, other assets, or se	rvices give	en by t	he reportir	ng foundation 1	f the found	(b) should always show the fair n dation received less than fair mar s, other assets, or services recei	ket value		
a) Line No	(b) Amount involved	(c) Name	of nonch	naritable exe	mpt organization	( <b>d)</b> De	escription of transfers, transactions, and s	haring arra	ngemei	nts
	ndation directly or indi			•	•			v		
described <b>√</b> No	in section 501(c) or tr	ie Code (o	tner tn	ian section	1 50 1 (c)(3)) or	in section	1527?	Y	es	
• •	complete the following	schedule								
	(a) Name of organization			(b	) Type of organiza	tion	(c) Description of rela	ationship		
							1			
Und	er nenalties of nemiury	I declare	that I h	l have exam	uned this retur	n including		tatement	s and	to
							ion of preparer (other than taxpay			
ign Infor	mation of which prepar	er has any	/ knowl	edge						
lere \	*****				2017-08-07					
- (										
'	Signature of officer or t	rustee			Date					
	Print/Type preparer's Tamara L McInerne		Prepa	rer's Signa	ature					
	ramara E MCINEINE	,								
aid	Firm's name ▶									
reparer	BPM LLP									
Jse	Eirmle addres - t									
nly	Firm's address >	Sta 201 F	ac+ D ~	lo Alto CA	,					
	2000 University Ave 94303	SIE ZUI E	astPä	IO AILO, C.F	١					

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
XRP Cyrptocurrency	D	2014-07-11	2015-07-31
XRP Cyrptocurrency	D	2014-07-11	2015-08-31
XRP Cyrptocurrency	D	2014-07-11	2015-09-30
XRP Cyrptocurrency	D	2014-07-11	2015-12-31
XRP Cyrptocurrency	D	2014-07-11	2016-01-31
XRP Cyrptocurrency	D	2014-07-11	2016-02-29
XRP Cyrptocurrency	D	2014-07-11	2016-03-31
XRP Cyrptocurrency	D	2014-07-11	2016-04-30

# Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed <b>(f)</b> (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
38,590			38,590
107,076			107,076
48,091			48,091
92,990			92,990
80,310			80,310
105,575			105,575
114,785			114,785

82,886 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus
(i) F M V as of 12/31/69	Adjusted basis <b>(j)</b> as of 12/31/69	Excess of col (ı) (k) over col (j), ıf any	col (k), but not less than -0-) <b>or</b> (I) Losses (from col (h))
			38,590
			107,076
			48,091
			92,990
			80,310
			105,575
			114,785
			82,886

TY 2015 Accounting Fees Schedule
----------------------------------

Name: RippleWorks Inc

ETN: 46-5604813

1,508

<b>EIN:</b> 46-5604812			
Category	Amount	Net Investment Income	

Accounting

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Adjusted Net

Income

754

Disbursements for Charitable

754

Purposes

DLN: 93491219006577

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491219006577
TY 2015 Investments - Other S	Schedule	
Name: 1	RıppleWorks Inc	

<b>EIN:</b> 46-5604812				
Ca	ategory/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
XRP Holdings		FMV	9,207,130	9,207,130

TV	201	5 I	enal	Fees	Sch	عليياء

Category

Legal

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

**EIN:** 46-5604812

**Net Investment** 

1.782

**Adjusted Net** Income

Disbursements for Charitable

23,930

Purposes

DLN: 93491219006577

Amount

17,821

**Name:** RippleWorks Inc

Income

## **TY 2015 Other Expenses Schedule**

Name: RippleWorks Inc

FIN: 46-5604812

E14. 40 3004012					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
Other Expert Expenses	259	0	0	0	
Workers Comp	5,273	0	0	5,273	
Payroll Services	8,888	0	0	8,888	
Office Expenses	650	0	0	619	
Insurance	2,337	0	0	4,327	
Postage & Delivery	53	0	0	29	
Computer Equipment	5,646	0	0	5,646	
Marketing	5,414	0	0	12,164	
Bank Charges	3,201	1,601	0	1,601	
Dues and Subscriptions	6,500	0	0	6,500	

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Meals and Entertainment	2,319	0	0	2,319
Other	517	0	0	452

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491219006577					
TY 2015 Other Liabilities Schedule								
Name:	RippleWorks Inc							
EIN:	46-5604812							

<b>EIN:</b> 46-5604812		
Description	Beginning of Year - Book Value	End of Year - Book Value
Income taxes Payable	10,918	23,919

Deferred Tax liability

373,056

98,150

efile GRAPHIC print - DO NOT PRO	OCESS As Filed Data -				
TV 2015 Other Professional East Schodule					

Name: RippleWorks Inc EIN: 46-5604812

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Management Fees	7,351	0	0	5,601
Other	3,282	0	0	31,909

DLN: 93491219006577

TY 2015 Substantial Contributors Schedule
---

Name: RippleWorks Inc

**EIN:** 46-5604812 Name

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

**Address** 

DLN: 93491219006577

c/o 585 Broadway Street Redwood City, CA 94063

Christian Larsen

### 1 Y 2015 Taxes Schedule

Name: RippleWorks Inc

EIN: 40-3004612				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Payroll Taxes	33,108	0	0	33,108
Federal Excise Tax	12,841	0	0	0
Deferred Excise Tax	274,906	0	0	0
Other Taxes	160	0	0	160

efile GRAPHIC print	- DO NOT PROCESS   As Filed Data -		DLN: 93491219006577	
Schedule B	Schedule of Contributors		OMB No 1545-0047	
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, or 990-PF ► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its www irs gov/form990	instructions is at	2015	
Name of the organizat	ion	Employer id	lentification number	
RippleWorks Inc		46-56048	12	
Organization type (ch	neck one)			
Filers of:	Section:			
Form 990 or 990-EZ	501(c)( ) (enter number) organization			
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private for	oundation		
	527 political organization			
Form 990-PF	√ 501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable trust treated as a private foundation			
	501(c)(3) taxable private foundation			
	zation filing Form 990, 990-EZ, or 990-PF that received, during the year, contri			
other property	r) from any one contributor Complete Parts I and II See instructions for detern	nınıng a contributor's	total contributions	
Special Rules				
under sections received from a	tion described in section $501(c)(3)$ filing Form 990 or 990-EZ that met the $33^{1/2}(509(a)(1))$ and $170(b)(1)(A)(vi)$ , that checked Schedule A (Form 990 or 990-E iny one contributor, during the year, total contributions of the greater of <b>(1)</b> \$5, or (ii) Form 990-EZ, line 1 Complete Parts I and II	Z), Part II, line 13, 16a	a, or 16b, and that	
during the year,	ition described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that total contributions of more than \$1,000 exclusively for religious, charitable, son of cruelty to children or animals. Complete Parts I, II, and III			
during the year, this box is chec purpose Do no	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that a contributions exclusively for religious, charitable, etc., purposes, but no sucled, enter here the total contributions that were received during the year for a complete any of the parts unless the <b>General Rule</b> applies to this organization able, etc., contributions totaling \$5,000 or more during the year	h contributions totaled an <i>exclusively</i> religio ion because it receiv	d more than \$1,000 lf us, charitable, etc ,	

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization RippleWorks Inc Employer identification number 46-5604812

Part I	Contributors (see instructions) Use duplicate copies of Part I	if additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1			Person 🗸
· ·	Christian Larsen		Payroll
	c/o 585 Broadway Street	\$ 3,299,700	Fayron
	Redwood City, CA 94063		Noncash 🗸
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2			Person 🗸
	Ripple Inc		Payroll
	585 Broadway Street	\$ 2,963,800	] " " "
	Redwood City, CA 94063		Noncash 🗸
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3			Person
	O midyar		Payroll
	1991 Broadway Street	\$ 200,000	Tuyron
	Redwood City, CA 94063		Noncash
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
		\$	Payroll
			Noncash —
			(Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
			Payroll
		<u>\$</u>	   Noncash
			(Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
	_		Person
			Payroll
			Noncash —
			(Complete Part II for noncash contributions )

Name of organization RippleWorks Inc		Employer identification number	
ippleworks The		46-5604812	
Part II	Noncas h Property (see instructions) Use duplicate copies of Part II if additional space is needed		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	XRP Cyrptocurrency - 499,999,979 Units	\$ 3,199 700	2015-07-27
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	XRP Cyrptocurrency - 1,000,000,000 Units	\$ 2,963 800	2015-11-25
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received