

Form **990-PF**  
 Department of the Treasury  
 Internal Revenue Service

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

OMB No 1545-0052

**2016**

**Open to Public Inspection**

▶ Do not enter social security numbers on this form as it may be made public.  
 ▶ Information about Form 990-PF and its instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

**For calendar year 2016, or tax year beginning 01-01-2016 , and ending 12-31-2016**

Name of foundation A GLIMMER OF HOPE FOUNDATION		<b>A Employer identification number</b> 31-1758218
Number and street (or P O box number if mail is not delivered to street address) 3600 N CAP OF TX HWY BLDG B NO 330	Room/suite	<b>B Telephone number (see instructions)</b> (512) 328-9944
City or town, state or province, country, and ZIP or foreign postal code AUSTIN, TX 78746		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
<b>I</b> Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 54,442,553	<b>J</b> Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis )	<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

<b>Part I Analysis of Revenue and Expenses</b> (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc , received (attach schedule)	5,840,695			
	<b>2</b> Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B				
	<b>3</b> Interest on savings and temporary cash investments	344	375		
	<b>4</b> Dividends and interest from securities	130,045	142,552		
	<b>5a</b> Gross rents				
	<b>b</b> Net rental income or (loss)				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10	-189,833			
	<b>b</b> Gross sales price for all assets on line 6a	14,508,189			
	<b>7</b> Capital gain net income (from Part IV, line 2)		2,954,517		
	<b>8</b> Net short-term capital gain				
	<b>9</b> Income modifications				
	<b>10a</b> Gross sales less returns and allowances				
<b>b</b> Less Cost of goods sold					
<b>c</b> Gross profit or (loss) (attach schedule)					
<b>11</b> Other income (attach schedule)	116	-1,347			
<b>12 Total.</b> Add lines 1 through 11	5,781,367	3,096,097			
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc	247,297	0	247,297	
	<b>14</b> Other employee salaries and wages	980,053	0	980,053	
	<b>15</b> Pension plans, employee benefits	144,676	0	130,329	
	<b>16a</b> Legal fees (attach schedule)	4,085	0	1,585	
	<b>b</b> Accounting fees (attach schedule)	33,728	0	33,728	
	<b>c</b> Other professional fees (attach schedule)	131,547	48,204	83,343	
	<b>17</b> Interest				
	<b>18</b> Taxes (attach schedule) (see instructions)	99,700	0	69,935	
	<b>19</b> Depreciation (attach schedule) and depletion	48,604	0		
	<b>20</b> Occupancy	191,518	0	177,487	
	<b>21</b> Travel, conferences, and meetings	113,376	0	113,831	
	<b>22</b> Printing and publications	3,567	0	3,567	
	<b>23</b> Other expenses (attach schedule)	249,779	0	256,451	
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23	2,247,930	48,204	2,097,606	
<b>25</b> Contributions, gifts, grants paid	5,642,857		5,642,857		
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	7,890,787	48,204	7,740,463		
<b>27</b> Subtract line 26 from line 12					
<b>a Excess of revenue over expenses and disbursements</b>	-2,109,420				
<b>b Net investment income</b> (if negative, enter -0-)		3,047,893			
<b>c Adjusted net income</b> (if negative, enter -0-)					

<b>Part II 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 year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .			
	<b>2</b> Savings and temporary cash investments . . . . .	15,464,228	23,027,337	23,027,337
	<b>3</b> Accounts receivable ▶ <u>34,646</u>			
	Less allowance for doubtful accounts ▶ _____	7,333	34,646	34,646
	<b>4</b> Pledges receivable ▶ _____			
	Less allowance for doubtful accounts ▶ _____			
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____			
	Less allowance for doubtful accounts ▶ _____			
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .		20,862	20,862
	<b>10a</b> Investments—U S and state government obligations (attach schedule)			
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .	22,456,755	22,549,102	22,549,102
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .			
	<b>11</b> Investments—land, buildings, and equipment basis ▶ _____			
Less accumulated depreciation (attach schedule) ▶ _____				
<b>12</b> Investments—mortgage loans . . . . .				
<b>13</b> Investments—other (attach schedule) . . . . .	15,191,614	8,807,659	8,807,659	
<b>14</b> Land, buildings, and equipment basis ▶ <u>215,993</u>				
Less accumulated depreciation (attach schedule) ▶ <u>213,046</u>	51,551	2,947	2,947	
<b>15</b> Other assets (describe ▶ _____)	37,120	0	0	
<b>16 Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	53,208,601	54,442,553	54,442,553	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	40,511	57,066	
	<b>18</b> Grants payable . . . . .			
	<b>19</b> Deferred revenue . . . . .	2,768,799	1,639,097	
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .			
	<b>22</b> Other liabilities (describe ▶ _____)			
	<b>23 Total liabilities</b> (add lines 17 through 22) . . . . .	2,809,310	1,696,163	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	<b>24</b> Unrestricted . . . . .	50,399,291	52,746,390	
	<b>25</b> Temporarily restricted . . . . .			
	<b>26</b> Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 27 through 31.</b>			
	<b>27</b> Capital stock, trust principal, or current funds . . . . .			
	<b>28</b> Paid-in or capital surplus, or land, bldg , and equipment fund			
<b>29</b> Retained earnings, accumulated income, endowment, or other funds				
<b>30 Total net assets or fund balances</b> (see instructions) . . . . .	50,399,291	52,746,390		
<b>31 Total liabilities and net assets/fund balances</b> (see instructions) .	53,208,601	54,442,553		

<b>Part III Analysis of Changes in Net Assets or Fund Balances</b>		
<b>1</b> Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	50,399,291
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	-2,109,420
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	4,470,100
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	52,759,971
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	13,581
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	<b>6</b>	52,746,390

**Part IV Capital Gains and Losses for Tax on Investment Income**

<b>(a)</b> List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	<b>(b)</b> How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo, day, yr)	<b>(d)</b> Date sold (mo, day, yr)
<b>1 a</b> PUBLICLY TRADED SECURITIES	P		
<b>b</b> PUBLICLY TRADED SECURITIES	P		
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

<b>(e)</b> Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	<b>(g)</b> Cost or other basis plus expense of sale	<b>(h)</b> Gain or (loss) (e) plus (f) minus (g)
<b>a</b> 11,363,839		11,553,672	-189,833
<b>b</b> 3,144,350			3,144,350
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			<b>(l)</b> Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
<b>(i)</b> F M V as of 12/31/69	<b>(j)</b> Adjusted basis as of 12/31/69	<b>(k)</b> Excess of col (i) over col (j), if any	
<b>a</b>			-189,833
<b>b</b>			3,144,350
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

<b>2</b> Capital gain net income or (net capital loss)	2	2,954,517
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No  
 If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

**1** Enter the appropriate amount in each column for each year, see instructions before making any entries

<b>(a)</b> Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	<b>(c)</b> Net value of noncharitable-use assets	<b>(d)</b> Distribution ratio (col (b) divided by col (c))
2015	7,188,468	50,946,361	0.141099
2014	8,844,725	53,210,732	0.166221
2013	14,674,133	49,314,170	0.297564
2012	11,534,409	47,052,913	0.245137
2011	10,369,283	48,228,130	0.215005

  

<b>2</b> Total of line 1, column (d)	2	1.065026
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0.213005
<b>4</b> Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	4	46,117,740
<b>5</b> Multiply line 4 by line 3	5	9,823,309
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	6	30,479
<b>7</b> Add lines 5 and 6	7	9,853,788
<b>8</b> Enter qualifying distributions from Part XII, line 4	8	7,740,463

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

Table with 11 rows for excise tax calculation. Includes fields for exempt foundations, tax under section 511, subtitle A tax, and credits/payments. Total tax due is 974.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions about political campaigns, political expenditures, and state reporting requirements. Includes Yes/No columns.

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-13 regarding controlled entities, donor advised funds, and public inspection requirements.

14 The books are in care of THE FOUNDATION Telephone no (512) 328-9944

Located at 3600 N CAP OF TX HWY BLDG B NO 330 AUSTIN TX ZIP+4 78746

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here 15

16 At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? Yes No

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.

Main table with 3 columns: Question, Yes, No. Rows 1a-1c, 2a-2c, 3a-3b, 4a-4b regarding Form 4720 exceptions and requirements.

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (Continued)

**5a** During the year did the foundation pay or incur any amount to

**(1)** Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  Yes  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  No

**(3)** Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No

**(4)** Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions).  Yes  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  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 section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  Yes  No

Organizations relying on a current notice regarding disaster assistance check here.

**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  Yes  No

If "Yes," attach the statement required by Regulations section 53.4945-5(d)

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

If "Yes" to 6b, file Form 8870

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes  No

**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?  Yes  No

<b>5b</b>	Yes	
<b>6b</b>		No
<b>7b</b>		

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				

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

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
KENDRA BEACH 3600 N CAP OF TX HWY BLDG B 330 AUSTIN, TX 78746	DIRECTOR OF COMMUNIC 40 00	90,201	8,560	0
ELIZABETH MULLANEY 3600 N CAP OF TX HWY BLDG B 330 AUSTIN, TX 78746	SENIOR OPERATIONS MA 40 00	72,032	8,015	0
BRODY KWIATKOWSKI 3600 N CAP OF TX HWY BLDG B 330 AUSTIN, TX 78746	LEAD DEVELOPER 40 00	67,214	7,871	0
CARLA POWER 3600 N CAP OF TX HWY BLDG B 330 AUSTIN, TX 78746	CONTROLLER 40 00	57,053	16,208	0
LESLIE LLADO 3600 N CAP OF TX HWY BLDG B 330 AUSTIN, TX 78746	PROGRAM DEVELOPMENT 40 00	59,044	7,626	0

**Total** number of other employees paid over \$50,000.  **2**

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**

<b>3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".</b>		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<b>Total number of others receiving over \$50,000 for professional services.</b> . . . . . ▶		<b>0</b>

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3 . . . . . ▶	<b>0</b>

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	32,166,857
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	14,653,184
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	46,820,041
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	46,820,041
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	702,301
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	46,117,740
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	2,305,887

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	2,305,887
<b>2a</b>	Tax on investment income for 2016 from Part VI, line 5.	<b>2a</b>	60,958
<b>b</b>	Income tax for 2016 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	60,958
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	2,244,929
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	0
<b>5</b>	Add lines 3 and 4.	<b>5</b>	2,244,929
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	2,244,929

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	7,740,463
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	7,740,463
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	7,740,463

**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.

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
<b>1</b> Distributable amount for 2016 from Part XI, line 7				2,244,929
<b>2</b> Undistributed income, if any, as of the end of 2016				
<b>a</b> Enter amount for 2015 only. . . . .			0	
<b>b</b> Total for prior years 20___, 20___, 20___		0		
<b>3</b> Excess distributions carryover, if any, to 2016				
<b>a</b> From 2011. . . . .	8,007,274			
<b>b</b> From 2012. . . . .	9,234,287			
<b>c</b> From 2013. . . . .	12,221,702			
<b>d</b> From 2014. . . . .	6,451,645			
<b>e</b> From 2015. . . . .	4,710,907			
<b>f</b> Total of lines 3a through e. . . . .	40,625,815			
<b>4</b> Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ <u>7,740,463</u>				
<b>a</b> Applied to 2015, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2016 distributable amount. . . . .				2,244,929
<b>e</b> Remaining amount distributed out of corpus	5,495,534			
<b>5</b> Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a) )				0
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	46,121,349			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> 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		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017 . . . . .				0
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .	80,000			
<b>8</b> Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions). . . . .	7,927,274			
<b>9</b> Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a . . . . .	38,114,075			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2012. . . . .	9,234,287			
<b>b</b> Excess from 2013. . . . .	12,221,702			
<b>c</b> Excess from 2014. . . . .	6,451,645			
<b>d</b> Excess from 2015. . . . .	4,710,907			
<b>e</b> Excess from 2016. . . . .	5,495,534			

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling. . . . . ▶

**b** Check box to indicate whether the organization is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

**2a** Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .

	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					

**3** Complete 3a, b, or c for the alternative test relied upon

**a** "Assets" alternative test—enter

(1) Value of all assets . . . . .

(2) Value of assets qualifying under section 4942(j)(3)(B)(i)

**b** "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .

**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) . . . . .

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .

(3) Largest amount of support from an exempt organization

(4) Gross investment income

**Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)**

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )  
See Additional Data Table

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

---

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

**a** The name, address, and telephone number or email address of the person to whom applications should be addressed

---

**b** The form in which applications should be submitted and information and materials they should include

---

**c** Any submission deadlines

---

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

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . .</b> ▶ <b>3a</b>				5,642,857
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b> ▶ <b>3b</b>				0





**Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation**

<b>(a)</b> Name and address	Title, and average hours per week <b>(b)</b> devoted to position	<b>(c)</b> Compensation (If not paid, enter -0-)	<b>(d)</b> Contributions to employee benefit plans and deferred compensation	Expense account, <b>(e)</b> other allowances
PHILIP BERBER 3600 N CAP OF TX HWY BLDG B 330 AUSTIN, TX 78746	CHAIRMAN, CO-FOUNDER 5 00	0	0	0
DONNA BERBER 3600 N CAP OF TX HWY BLDG B 330 AUSTIN, TX 78746	DIRECTOR / PRESIDENT & CEO 30 00	480	0	0
RYAN BERBER 3600 N CAP OF TX HWY BLDG B 330 AUSTIN, TX 78746	DIRECTOR 1 00	0	0	0
SHANE BERBER 3600 N CAP OF TX HWY BLDG B 330 AUSTIN, TX 78746	DIRECTOR 1 00	0	0	0
SANTIAGO MONTOYA 3600 N CAP OF TX HWY BLDG B 330 AUSTIN, TX 78746	DIRECTOR / CHIEF INVESTMENT OFFICER 20 00	0	0	0
STEPHANIE FAST 3600 N CAP OF TX HWY BLDG B 330 AUSTIN, TX 78746	CHIEF FINANCIAL OFFICER 40 00	124,389	9,586	0
ALICYN YARBROUGH 3600 N CAP OF TX HWY BLDG B 330 AUSTIN, TX 78746	CHIEF DEVELOPMENT OFFICER 40 00	122,428	4,981	0

**Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).**

PHILIP BERBER

DONNA BERBER

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
A GLIMMER OF HOPE FOUNDATION AUSTIN  3600 N CAPITAL OF TX HWY BLDGB330 AUSTIN, TX 78746	RELATED ORGANIZATION	PF	TO FUND ORGANIZATION'S EXEMPT PURPOSE	612,500
RELIEF SOCIETY OF TIGRAY 20 MEKELE ADDIS ABABA ET	NONE	FOREIGN CHARITY	TO FUND ORGANIZATION'S EXEMPT PURPOSE	847,670
ORGANIZATION FOR REHABILITATION & DEVELOPMENT IN AMHARA 132 BAHIR DAR ADDIS ABABA ET	NONE	FOREIGN CHARITY	TO FUND ORGANIZATION'S EXEMPT PURPOSE	211,041
DAWRO DEVELOPMENT ASSOCIATION PO BOX 06 TERCHA ET	NONE	FOREIGN CHARITY	TO FUND ORGANIZATION'S EXEMPT PURPOSE	342,176
AMHARA DEVELOPMENT ASSOCIATION 132 BAHIR DAR ADDIS ABABA ET	NONE	FOREIGN CHARITY	TO FUND ORGANIZATION'S EXEMPT PURPOSE	692,720
<b>Total . . . . .</b> ▶ <b>3a</b>				5,642,857

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
OROMIYA DEVELOPMENT ASSOCIATION 8801 ADDIS ABABA ET	NONE	FOREIGN CHARITY	TO FUND ORGANIZATION'S EXEMPT PURPOSE	1,193,646
TIGRAY DEVELOPMENT ASSOCIATION 8801 ADDIS ABABA ET	NONE	FOREIGN CHARITY	TO FUND ORGANIZATION'S EXEMPT PURPOSE	1,699,440
DEMBI DOLLO HOSPITAL AND ABEBECH GOBENA YAHETSANAT KEBEKABENA LIMAT MAHIBER 18 KELEM WOLLEGA ZONE ET	NONE	FOREIGN CHARITY	TO FUND ORGANIZATION'S EXEMPT PURPOSE	2,133
MAINEGUS SAVINGS AND CREDIT COOPERATIVE LAYLAY MAICHEW WOREDA MAELALAWI ZONE TIGRAY ET	NONE	FOREIGN CHARITY	TO DISTRIBUTE MICROFINANCE LOANS	9,452
MEDHANEALEM SAVINGS AND CREDIT COOPERATIVE LAYLAY MAICHEW WOREDA MAELALAWI ZONE TIGRAY ET	NONE	FOREIGN CHARITY	TO DISTRIBUTE MICROFINANCE LOANS	7,509
<b>Total . . . . .</b> ► <b>3a</b>				5,642,857

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MAINSEGLA SAVINGS AND CREDIT COOPERATIVE LAYLAY MAICHEW WOREDA MAELALAWI ZONE TIGRAY ET	NONE	FOREIGN CHARITY	TO DISTRIBUTE MICROFINANCE LOANS	3,630
WOINI SAVINGS AND CREDIT COOPERATIVE LAYLAY MAICHEW WOREDA MAELALAWI ZONE TIGRAY ET	NONE	FOREIGN CHARITY	TO DISTRIBUTE MICROFINANCE LOANS	9,018
A GLIMMER OF HOPE FOUNDATION UK C/O PROSPECTUS LDT 20-22 STUKELEY STREET LONDON WC2B 5LA UK	RELATED ORGANIZATION	FOREIGN CHARITY	TO FUND ORGANIZATION'S EXEMPT PURPOSE	11,922
<b>Total . . . . .</b> ▶				<b>5,642,857</b>
<b>3a</b>				

**TY 2016 Accounting Fees Schedule****Name:** A GLIMMER OF HOPE FOUNDATION**EIN:** 31-1758218

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ACCOUNTING	33,728	0		33,728

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

## TY 2016 Expenditure Responsibility Statement

**Name:** A GLIMMER OF HOPE FOUNDATION

**EIN:** 31-1758218

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
SEE ATTACHED DETAIL	3600 N CAP OF TX HWY BLDG B AUSTIN, TX 78746	2016-12-31	14,744,760	SEE ATTACHED DETAIL	11,038,150				

**TY 2016 Investments Corporate Stock Schedule****Name:** A GLIMMER OF HOPE FOUNDATION**EIN:** 31-1758218

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
BERKSHIRE HATHAWAY INC-CL B	16,619,886	16,619,886
ALPHABET INC. CL C	436,078	436,078
APPLE INC	387,997	387,997
CHARLES SCHWAB CORP	610,206	610,206
CHARTER COMMUNICATN CL A	536,971	536,971
COLGATE-PALMOLIVE CO	433,540	433,540
DANAHER CORP	200,438	200,438
DEERE & CO	492,531	492,531
IBM CORP	270,564	270,564
LIBERTY GLOBAL INC. F CL C	386,545	386,545
MASTERCARD INC	536,900	536,900
MOODYS CORP	498,217	498,217
PHILLIPS 66	387,981	387,981
TJX COMPANIES INC	382,787	382,787
TRANSDIGM GROUP INC	368,461	368,461

**TY 2016 Investments - Other Schedule****Name:** A GLIMMER OF HOPE FOUNDATION**EIN:** 31-1758218

<b>Category/ Item</b>	<b>Listed at Cost or FMV</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
DYNAMO FUND	FMV	1,044,803	1,044,803
SPRUCE HOUSE PARTNERSHIP LP	FMV	1,312,080	1,312,080
BARKER PARTNERSHIP FUND	FMV	1,028,406	1,028,406
FVP OVERSEAS LTD.	FMV	1,131,249	1,131,249
PRAESIDIUM STRATEGIC OPPORTUNITY OFFSHORE FUND, LTD.	FMV	1,159,319	1,159,319
ASHE CAPITAL PARTNERS, LP	FMV	1,098,439	1,098,439
KINGSWAY FUND	FMV	975,560	975,560
VALUEQUEST CAPITAL LIMITED	FMV	1,057,803	1,057,803

**TY 2016 Legal Fees Schedule****Name:** A GLIMMER OF HOPE FOUNDATION**EIN:** 31-1758218

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
LEGAL	4,085	0		1,585

**TY 2016 Other Assets Schedule****Name:** A GLIMMER OF HOPE FOUNDATION**EIN:** 31-1758218**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
	37,120		

**TY 2016 Other Decreases Schedule****Name:** A GLIMMER OF HOPE FOUNDATION**EIN:** 31-1758218

<b>Description</b>	<b>Amount</b>
FOREIGN CURRENCY TRANSLATION ADJUSTMENT	13,581

**TY 2016 Other Expenses Schedule****Name:** A GLIMMER OF HOPE FOUNDATION**EIN:** 31-1758218**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL ADMINISTRATION FEES	8,937	0		9,228
TRAINING AND EMPLOYEE DEVELOPMENT	4,614	0		4,614
MEALS AND ENTERTAINMENT	1,819	0		1,819
KITCHEN/FOOD	14,350	0		14,350
OFFICE SUPPLIES	12,052	0		14,280
TELEPHONE	13,269	0		13,269
EQUIPMENT MAINTENANCE/REPAIR	2,842	0		2,842
POSTAGE AND DELIVERY	832	0		832
TECHNOLOGY	44,685	0		44,685
MARKETING	44,387	0		45,124

**Other Expenses Schedule**

<b>Description</b>	<b>Revenue and Expenses per Books</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
DONOR DEVELOPMENT	8,841	0		8,805
INSURANCE	26,062	0		26,062
BANK SERVICE CHARGES	609	0		609
MERCHANT SERVICES	2,319	0		2,319
CREDIT CARD RENEWAL FEES	225	0		225
STATE FILING FEES	1,562	0		1,562
EQUIPMENT AND SUPPLIES FOR ETHIOPIA OFFICE	6,470	0		9,962
OTHER EXPENSES	-7,790	0		-7,830
EXPAT EXPENSES	570	0		570
VEHICLE OPERATIONS	62,124	0		62,124

## Other Expenses Schedule

<b>Description</b>	<b>Revenue and Expenses per Books</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
SOCCER BALLS	1,000	0		1,000

**TY 2016 Other Income Schedule****Name:** A GLIMMER OF HOPE FOUNDATION**EIN:** 31-1758218**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
K-1 NET CAPITAL GAIN (LOSS)		-1,347	
MISCELLANEOUS	116		116

**TY 2016 Other Increases Schedule****Name:** A GLIMMER OF HOPE FOUNDATION**EIN:** 31-1758218

<b>Description</b>	<b>Amount</b>
UNREALIZED GAIN	4,470,100

**TY 2016 Other Professional Fees Schedule****Name:** A GLIMMER OF HOPE FOUNDATION**EIN:** 31-1758218

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
TECHNOLOGY SUPPORT	31,666	0		31,666
OTHER PROFESSIONAL FEES	20,498	0		20,498
INVESTMENT MANAGEMENT FEES	48,204	48,204		0
SOLAR POWER SURVEY ASSESSMENT	8,560	0		8,560
BASELINE SURVEY ASSESSMENT	22,619	0		22,619

**TY 2016 Taxes Schedule****Name:** A GLIMMER OF HOPE FOUNDATION**EIN:** 31-1758218

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
INCOME TAX	29,765	0		0
PROPERTY TAX	1,785	0		1,785
PAYROLL TAXES	68,150	0		68,150

**TY 2016 TransfersToControlledEntities****Name:** A GLIMMER OF HOPE FOUNDATION**EIN:** 31-1758218

<b>Name</b>	<b>US / Foreign Address</b>	<b>EIN</b>	<b>Description</b>	<b>Amount</b>
A GLIMMER OF HOPE FOUNDATION AUSTIN	3600 N CAPITAL OF TX HWY BLDGB 330 AUSTIN, TX 78746	20-0733502	GRANTS	612,500
A GLIMMER OF HOPE FOUNDATION UK	C/O PROSPECTUS LTD 20-22 STUKELEY STREET LONDON WC2B 5LA UK	31-1758218	GRANTS	11,922
<b>Total</b>				624,422

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)  
Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**  
▶ Attach to Form 990, 990-EZ, or 990-PF  
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at  
[www.irs.gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047  
**2016**

**Name of the organization**  
A GLIMMER OF HOPE FOUNDATION

**Employer identification number**  
31-1758218

**Organization type** (check one)

**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

Form 990-PF

- 527 political organization
- 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 boxes for both the General Rule and a Special Rule See instructions

**General Rule**

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

**Special Rules**

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup> 3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc , purposes, but no such contributions totaled 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 totaling \$5,000 or more during the year . . . . . ▶ \$ \_\_\_\_\_

**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)

<b>Name of organization</b> A GLIMMER OF HOPE FOUNDATION	<b>Employer identification number</b> 31-1758218
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<b>Part I Contributors</b> (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
—	See Additional Data Table <hr/> <hr/>	\$ _____	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )
—	<hr/> <hr/>	\$ _____	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )
—	<hr/> <hr/>	\$ _____	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )
—	<hr/> <hr/>	\$ _____	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )
—	<hr/> <hr/>	\$ _____	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )
—	<hr/> <hr/>	\$ _____	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )
—	<hr/> <hr/>	\$ _____	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )

<b>Name of organization</b> A GLIMMER OF HOPE FOUNDATION	<b>Employer identification number</b> 31-1758218
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**Part II Noncash 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	55,000 SHARES SILICON LABS	\$ 3,144,350	2016-12-31
	_____	_____ s	_____
	_____	_____ s	_____
	_____	_____ s	_____
	_____	_____ s	_____
	_____	_____ s	_____
	_____	_____ s	_____
	_____	_____ s	_____
	_____	_____ s	_____

<b>Name of organization</b> A GLIMMER OF HOPE FOUNDATION	<b>Employer identification number</b> 31-1758218
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____

**Additional Data****Software ID:****Software Version:****EIN:** 31-1758218**Name:** A GLIMMER OF HOPE FOUNDATION

Form 990 Schedule B, 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	DAVID AND ISABEL WELLAND <hr/> 2512 JANICE DRIVE <hr/> AUSTIN, TX 78703	\$ 3,144,350	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input checked="" type="checkbox"/> (Complete Part II for noncash contribution )
2	IKEA FOUNDATION <hr/> PO BOX 11134 2301 <hr/> EC LEIDEN, NL	\$ 1,129,701	<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )
3	BERBER CHARITABLE LEAD TRUST OF 2012 <hr/> 1103 CRYSTAL CREEK DRIVE <hr/> AUSTIN, TX 78746	\$ 500,000	<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )
4	THE HABER CHARITABLE TRUST <hr/> 26 KINGS CHASE CHILTERN CLOSE <hr/> BUSHEY HERTFORDSHIRE, WD2 3PZUK	\$ 209,570	<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )
5	CLAUDIA SHUEY <hr/> 7300 WEST RIM DR <hr/> AUSTIN, TX 78731	\$ 126,000	<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )
6	LISA HARRIS <hr/> 3401 FARVIEW COVE <hr/> AUSTIN, TX 78730	\$ 111,611	<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )

Form 990 Schedule B, 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
<u>7</u>	NETRI FUNDACION <hr/> CALLE BALMES 191 ENTLO 2 08006 <hr/> BARCELONA, SP	<hr/> \$ 102,615	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution )
<u>8</u>	CLIFFORD AND REBECCA ZEIFMAN <hr/> 3208 CHURCHILL DRIVE <hr/> AUSTIN, TX 78703	<hr/> \$ 65,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution )
<u>9</u>	THE WATERLOO FOUNDATION <hr/> 46-48 CARDIFF ROAD LLANDAFF <hr/> CARDIFF, CF5 2DTUK	<hr/> \$ 64,025	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution )
<u>10</u>	MICHAEL & SUSAN DELL FOUNDATION <hr/> PO BOX 163867 <hr/> AUSTIN, TX 78716	<hr/> \$ 50,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution )
<u>11</u>	DAVID AND TRACI OSBORN <hr/> 3112 POINT O WOODS <hr/> AUSTIN, TX 78735	<hr/> \$ 50,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution )
<u>12</u>	JENNIFER MRLA-GRAY <hr/> 8020 PRENTISS DRIVE <hr/> MCKINNEY, TX 75071	<hr/> \$ 40,700	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution )

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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	WATER TO THRIVE	\$ 31,760	<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )
	8701 N MOPAC EXPRESSWAY 105		
	AUSTIN, TX 78759		
14	REBECCA EASTMOND	\$ 28,152	<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )
	JP MORGAN PRIVATE BANK 1 KNIGHTSBRI		
	LONDON SWX LX, UK		
15	DUTCH AND CAROL SCHMIDHAUSER	\$ 25,250	<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )
	3609 ROCKY LEDGE CIRCLE		
	WACO, TX 76708		
16	ERM FOUNDATION	\$ 22,300	<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )
	206 E 9TH ST17		
	AUSTIN, TX 78701		
17	HOTELS FOR HOPE	\$ 18,000	<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )
	2525 SOUTH LAMAR BLVD UNIT 1		
	AUSTIN, TX 78704		
18	HOUSTON JEWISH COMMUNITY FOUNDATION	\$ 10,000	<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )
	5603 BRAESWOOD BLVD		
	HOUSTON, TX 770963907		

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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	EVANGELINE INTERNATIONAL <hr/> 1225 E SUNSET DRIVE 775 <hr/> BELLINGHAM, WA 98226	<hr/> \$ 8,700	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution )
20	TIM OSTING <hr/> 14101 HWY 290 W SUITE 1400-B <hr/> AUSTIN, TX 78737	<hr/> \$ 8,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution )
21	AID FOR AFRICA <hr/> 6909 RIDGEWOOD AVENUE <hr/> CHEVY CHASE, MD 20815	<hr/> \$ 8,084	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution )
22	KERSTIN & PER THORNBLOD <hr/> LOTGATAN 3C <hr/> NORRK PING, 60337SW	<hr/> \$ 6,387	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution )
23	IPI COOPERACION <hr/> GRAN VIA DE LES CORTS CATALANES 646 <hr/> BARCELONA, SP	<hr/> \$ 6,195	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution )
24	KYLE HUNTER <hr/> 1405 MICHAUX RD <hr/> CHAPEL HILL, NC 27514	<hr/> \$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution )