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

Name of the espectac

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Schedule of Contributors

OMB No. 1545-0047

Employee Identification

2012

Hame of the signification		Limpioyar indirection intilical		
WD FOUNDATION		33-0769372		
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 for	undation		
	527 political organization			
Form 990-PF	X 501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable trust treated as a private founds	ition		
	501(c)(3) taxable private foundation			
	vered by the General Rule or a Special Rule. (8), or (10) organization can check boxes for both the General Rule and a	Special Rule. See		
General Rule				
	ing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 e contributor. Complete Parts I and II.	or more (in money or		
Special Rules				
under sections 509(a)	3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support (1) and 170(b)(1)(A)(vi) and received from any one contributor, during the 200 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form II.	he year, a contribution of		
during the year, total	7), (8), or (10) organization filing Form 990 or 990-EZ that received from contributions of more than \$1,000 for use <i>exclusively</i> for religious, charit es, or the prevention of cruelty to children or animals. Complete Parts I, I	able, scientific, literary,		
during the year, contr not total to more than year for an <i>exclusively</i>	7), (8), or (10) organization filing Form 990 or 990-EZ that received from ibutions for use exclusively for religious, charitable, etc., purposes, but the \$1,000. If this box is checked, enter here the total contributions that we religious, charitable, etc., purpose. Do not complete any of the parts unlication because it received nonexclusively religious, charitable, etc., continuous.	nese contributions did pre received during the ess the General Rule ributions of \$5,000 or		
Caution. An organization that is 990-EZ, or 990-PF), but it must	not covered by the General Rule and/or the Special Rules does not file answer "No" on Part IV, line 2 of its Form 990; or check the box on line f, to certify that it does not meet the filing requirements of Schedule B (Fo	Schedule B (Form 990, H of its Form 990-EZ or on		

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Name of or	genization UNDATION		Employer Identification number
	Contributors (see instructions). Use duplicate copies of Par	t i if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	WESTERN DIGITAL TECHNOLOGIES, INC. 3355 MICHELSON DRIVE, SUITE 100 IRVINE, CA 92612	\$ 2,637,500.00	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZiP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroil Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution.)

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Schedule B (Form 990, 990-EZ, or 990-PF) (2012) Name of organization

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WD FOUNDATION

Employer Identification number

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
		\$	
(a) No. from Part I	(b) Description of noncesh 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
		\$	
(a) No. from Part I	(b) Description of noncesh property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2012 Name of organization

Employer identification number

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Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. 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.)

l	Jse duplicate copies of Part III if addition	nal space is needed.			
(a) No. from Part I	(b) Purpose of glft	(c) Use of gift		(d) Description of how gift is held	
	<u> </u>	(e) Transfer of g	gift		
	Transferee's name, addrese, and	3 ZIP + 4	Relation	ship of transferor to transferee	
a) No. from Part i	(b) Purpose of glft	(c) Use of gift		(d) Description of how gift is held	

	(e) Transfer of gift				
	Transferse's name, address, and	d ZIP + 4	Relation	sahip of transferor to transferee	
a) No. from Part I	(b) Purpose of gift	(c) Use of gif	n	(d) Description of how gift is held	
		(e) Transfer of	gift		
	Transferae's name, address, an	d ZIP + 4	Relation	nahip of transferor to transferee	
a) No. from Part I	(b) Purpose of gift	(c) Use of gi	ft	(d) Description of how gift is held	
		(e) Transfer of	gift	l	
		• • • • • • • • • • • • • • • • • • • •	-		
	Transferee's name, address, and ZIP + 4		Relatio	Relationship of transferor to transferee	
	†				