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990-PF Department of the Treasury Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

Form 990-PF (2013

Open to Public Inspection 10/04 , 2013, and ending 12/31.2013 For calendar year 2013 or tax year beginning Name of foundation SIGNAL FOUNDATION FOR WIRELESS A Employer identification number INNOVATION, INC. 46-3948126 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) (215) 564-8542 200 BELLEVUE PARKWAY 300 City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here WILMINGTON, DE 19809 G Check all that apply Initial return Initial return of a former public charity 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization E If private foundation status was terminate Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here Cash X Accrual Fair market value of all assets at J Accounting method If the foundation is in a 60-month termination under section 507(b)(1)(B), check here end of year (from Part II, col. (c), line Other (specify) (Part I, column (d) must be on cash basis.) *16)* ▶ \$ (d) Disbursements Part I Analysis of Revenue and Expenses (The (a) Revenue and (b) Net investment (c) Adjusted net for charitable total of amounts in columns (b), (c), and (d) expenses per purposes income income may not necessarily equal the amounts in books column (a) (see instructions)) (cash basis only) 150,000. Contributions, gifts, grants, etc., received (attach schedule) if the foundation is not required to 2 ٠. 3 Interest on savings and temporary cash investments Dividends and interest from securities Gross rents Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) . Net short-term capital gain . . Income modifications 10 a Gross sales less returns and allowances · · b Less Cost of goods sold . Gross profit or (loss) (attach schedule) Other income (attach schedule) 11 150,000. Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits Legal fees (attach schedule) 16 a Accounting fees (attach schedule) Other professional fees (attach schedule). 17 18 Taxes (attach schedule) (see instructions) . . . 19 Depreciation (attach schedule) and depletion. ¥ 20 Occupancy nd 21 Travel, conferences, and meetings . . . 22 Printing and publications rating 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. Add lines 13 through 23 150,000. 150,000. Contributions, gifts, grants paid 150,000. 150,000 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c_Adjusted net income (if negative, enter -0-). .

46-3948126

Part	: 11	Balance Sheets description column should be for end-of-year	Beginning of year	End	of year
		amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	(Cash - non-interest-bearing			
2		Savings and temporary cash investments			
3		Accounts receivable			
	ı	Less allowance for doubtful accounts ▶	,		
4		Pledges receivable			
•	'	Less allowance for doubtful accounts			•
_					
5		Grants receivable			
6		Receivables due from officers, directors, trustees, and other	li de la constantina		
		disqualified persons (attach schedule) (see instructions)			
7		Other notes and loans receivable (attach schedule) $lacksquare$			
		Less allowance for doubtful accounts ▶			
8		Inventories for sale or use			
ssets 6	- 1	Prepaid expenses and deferred charges			
	a I	Investments - U S and state government obligations (attach schedule).			
ļ	b I	Investments - corporate stock (attach schedule)			
1		Investments - corporate bonds (attach schedule)			
11	- 1	Investments - land, buildings,			*
		and equipment basis Less accumulated depreciation (attach schedule)	1		
40		(attach schedule)			-
12	1	Investments - mortgage loans			
14		Land, buildings, and	l.		, , , ,
	í	Land, buildings, and equipment basis Less accumulated depreciation (attach schedule)	d	*	*******
	((attach schedule)			
15	,	Other assets (describe P)			
16		Total assets (to be completed by all filers - see the			
+		instructions Also, see page 1, item I)		(9
17	,	Accounts payable and accrued expenses			
18	(Grants payable			1
န္မ 19	١	Deferred revenue	N/B		, , ,
Liabilities 20 21 21	-	Loans from officers, directors, trustees, and other disqualified persons			;
등 21	- 1	Mortgages and other notes payable (attach schedule)] * <u>*</u> <u>*</u> <u></u>
그 ₂₂		Other liabilities (describe			
					T
23		Total liabilities (add lines 17 through 22)			ol 🗼 🥇
		Foundations that follow SFAS 117, check here . ▶			i
		and complete lines 24 through 26 and lines 30 and 31.			, , , , , , , ,
892 24		·			'.
E 24		Unrestricted			-
25 80		Temporarily restricted			- 1
필 26		Permanently restricted		<u> </u>	-
Assets or Fund Balan 5 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		Foundations that do not follow SFAS 117, ▶ 🗓			
0		check here and complete lines 27 through 31.			,
<u>s</u> 27		Capital stock, trust principal, or current funds		ļ	
28		Paid-in or capital surplus, or land, bldg , and equipment fund		<u> </u>	_
		Retained earnings, accumulated income, endowment, or other funds			
30 30		Total net assets or fund balances (see instructions)		0 (<u>o</u>
31		Total liabilities and net assets/fund balances (see			i
		instructions)		0	0
Part		Analysis of Changes in Net Assets or Fund	Balances		,
		ll net assets or fund balances at beginning of year - Part		(must agree with	
		of-year figure reported on prior year's return).			
2 =	nte	or amount from Part I line 27a		2	
2 ^	1110 11ho	er amount from Part I, line 27a		3	
		er increases not included in line 2 (itemize)			
4 A	aa	lines 1, 2, and 3			
		reases not included in line 2 (itemize)	- L 5) D- (" '	5	
<u>6 T</u>	ota	il net assets or fund balances at end of year (line 4 minu	s line 5) - Part II, column	(b), line 30 6	Form 990-PF (2013)

Page 3

Р	art IV Capital Gains	and Losses for Tax on Inv	estment Income			. 484
		d describe the kind(s) of property sold		(b) How acquired	(c) Date acquired	(d) Date sold
_		orick warehouse, or common stock, 200	shs. MLC Co)	P - Purchase D - Donation	(mo day w)	(mo , day, yr)
<u>1a</u>						
_ <u>b</u>		·			_	
_ <u>c</u>						
_ <u>u</u>				· · · · · · · · · · · · · · · · · · ·		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
a				<u> </u>		
_ <u></u>						
С						
_d	<u> </u>				_	
_e	<u> </u>		<u> </u>			
_	Complete only for assets	showing gain in column (h) and owner	ed by the foundation on 12/31/69		Gains (Col (h) g	
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	(k), but not less to Losses (from co	
a					<u> </u>	
_b						
_d				1		
_е		L		 		
2	Capital gain net income or	r / not canital loce l	f gain, also enter in Part I, line 7 f (loss), enter -0- in Part I, line 7	2		
3		n or (loss) as defined in sections 1				
	_	rt I, line 8, column (c) (see ins				
_	Part I, line 8		<u></u> ,	3		
_			educed Tax on Net Investment Inve			
w			T AVAILABLE FOR INITIAL butable amount of any year in the b		_] Yes [] No
<u>"</u>			r, see the instructions before makin	a any entr	100	
÷	(a)	(b)	(c)	g arry erru	(d)	
(Base penod years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution ration (col. (b) divided by	
	2012			<u> </u>		
	2011					
_	2010					
_	2009					
_	2008			ļ.,		
2	Total of line 1, column (d),,		2		
3	_	· · · · · · · · · · · · · · · · · · ·	le the total on line 2 by 5, or by the			
	number of years the foun	idation has been in existence it les	ss than 5 years	3		
4	Enter the net value of no	ncharitable-use assets for 2013 fr	om Part X, line 5	4		
5	Multiply line 4 by line 3			5		
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		
7	Add lines 5 and 6			7		
8	Enter qualifying distribution of the second	ons from Part XII, line 4	ın Part VI, line 1b, and complete	8 that part	using a 1% ta	x rate See the

7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

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c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here

b If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) 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

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its

foundation had excess business holdings in 2013.)

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013? | 4b | X
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_	31GNAL FOUNDAT	TON FOR WIRE.	LESS		46-3	948126	Page b
Pa	rt VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requ	ired (contin	ued)		· · ·
5 a	During the year did the foundation pay or incur any amou	int to					FFREE
	(1) Carry on propaganda, or otherwise attempt to influer	nce legislation (section	4945(e))?	. Tyes	X No		
	(2) Influence the outcome of any specific public ele	ction (see section 4	1955), or to carry or),			
	directly or indirectly, any voter registration drive?			Yes	X No	, T	, , , , , , , ,
	(3) Provide a grant to an individual for travel, study, or otl				X No		3
	(4) Provide a grant to an organization other than a						
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (s				X No		
	(5) Provide for any purpose other than religious, ch						, ,
	purposes, or for the prevention of cruelty to children of				X No		* **
ь	If any answer is "Yes" to 5a(1)-(5), did any of the						
	Regulations section 53 4945 or in a current notice regard					5b	, h i 12
	Organizations relying on a current notice regarding disast				_		
c	If the answer is "Yes" to question 5a(4), does the					- '	
•	because it maintained expenditure responsibility for the gi				X No		n ter in
	If "Yes," attach the statement required by Regulations section					٤ ,	
62	Did the foundation, during the year, receive any fund		otly to nay promium	•		3	
Ju	on a personal benefit contract?				X No		73 × × ×
ь	Did the foundation, during the year, pay premiums, direct				LA NO		
	If "Yes" to 6b, file Form 8870	only of indirectly, off a p	bersonal benefit contrat	a	• • • • •	6b	% , %2, '
7.2		rty to a probibited toy	abaltar transaction?		X No		at 3
	At any time during the tax year, was the foundation a pa		-	-			
	If "Yes," did the foundation receive any proceeds or have time. Information About Officers, Directors	Trustees Foun	dation Managers	n/ Highly Paid	d Employ	7b	X
га ——	and Contractors					y cc3,	
1	List all officers, directors, trustees, foundation n						
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (if not paid,	(d) Contribut employee bene	fit plans	(e) Expens	
		devoted to position	enter -0-)	and deferred con	npensation	Other and	
ΔΤ.	 CH 1		0				0
							0
							 -
	Compensation of five highest-paid employees	(other than thee	o included on line	. 4	44	\ If	
_	"NONE."	(other than thos	e included on line	: 1 - See 1	nstructio	ns). II no	one, enter
		(b) Title, and average		(d) Contribut		4-3.5	
(8	Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee b plans and de	eferred	(e) Expens other all	
				compensa	ation		
	NONE						
	NONE		······································				
					-		
		_					
		<u> </u>					
T-4-	I number of other employees hald over \$50,000						

Form 990-PF (2013) Page 7 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors (continued) Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE Total number of others receiving over \$50,000 for professional services. 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 Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc Summary of Program-Related Investments (see instructions) Amount Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 NONE All other program-related investments. See instructions 3 NONE

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Total. Add lines 1 through 3.

Form 990-PF (2013) Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, Part X see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. purposes Average monthly fair market value of securities 1a Average of monthly cash balances Fair market value of all other assets (see instructions) 1c Total (add lines 1a, b, and c) 1d Reduction claimed for blockage or other factors reported on lines 1a and Acquisition indebtedness applicable to line 1 assets Subtract line 2 from line 1d 3 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations Part XI and certain foreign organizations check here
and do not complete this part) Minimum investment return from Part X, line 6 Tax on investment income for 2013 from Part VI, line 5 Income tax for 2013 (This does not include the tax from Part VI.) ___ 2b Add lines 2a and 2b Distributable amount before adjustments Subtract line 2c from line 1 3 3 Recoveries of amounts treated as qualifying distributions 4 4 Add lines 3 and 4 5 5 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 Ía. 150,000. Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2 2 Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 150,000. Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income 5 Enter 1% of Part I, line 27b (see instructions) Adjusted qualifying distributions. Subtract line 5 from line 4 6 150,000.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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qualifies for the section 4940(e) reduction of tax in those years

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Рa	rt XIII Undistributed Income (see instru	ictions)			
1	Distributable amount for 2013 from Part XI,	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
•	line 7		,		0
2	Undistributed income, if any, as of the end of 2013	,*	,,		1
	Enter amount for 2012 only		Î		
	Total for prior years 20 11 ,20 10 ,20 09				
3	Excess distributions carryover, if any, to 2013:		:	······································	. ₹ ₹ ₹ - 2°
	From 2008	•			, ;
	From 2009				-
C	From 2010				- A - 1
d	From 2011				·* *
e	From 2012				
	Total of lines 3a through e		+		_
4	Qualifying distributions for 2013 from Part XII, line 4 ▶ \$	•	-		***************************************
а	Applied to 2012, but not more than line 2a		ľ		× , , , , , , , , , , , , , , , , , , ,
	Applied to undistributed income of prior years				
	(Election required - see instructions)			-	* * * * *
C	Treated as distributions out of corpus (Election			v	a , , , ,
	required - see instructions)		-		- 4
	Applied to 2013 distributable amount			:	
5	Excess distributions carryover applied to 2013		* *		* , 1
6	(If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as	 		· · · · · · · · · · · · · · · · · · ·	1 400 y 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
•	indicated below:	n I man.			- 1
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				v **,
	Prior years' undistributed income Subtract				- "
	line 4b from line 2b				· · · · · · · · · · · · · · · · · · ·
С	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				
е	Undistributed income for 2012. Subtract line 4a from line 2a. Taxable amount - see		,		\$
	instructions				1
f	Undistributed income for 2013 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2014				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				, ,
8	Excess distributions carryover from 2008 not			. 4	
	applied on line 5 or line 7 (see instructions)				1
9	Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a	0			1
10	Analysis of line 9				
а	Excess from 2009]
b	Excess from 2010				,,
	Excess from 2011				- , }
	Excess from 2012				
<u>e</u>	Excess from 2013				Form 990-PF/2013)
					Eason MUII. DE /2042\

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Pa	990-PF (2013) rt XV Supplementary Information (0	continued)			Page 11
3	Grants and Contributions Paid Durin	ng the Year or Appr	oved for F	uture Payment	
	Grants and Contributions Paid Durin Recipient Name and address (home or business)	If recipient is an individual,	Foundation	Burnous of errot or	
	Name and address (home or business)	any foundation manager	status of recipient	Purpose of grant or contribution	Amount
a	Paid during the year	or substantial contributor	recipient		
-	Tala daling the year				
Αſ	rch 2				
	,				
					1
		i			
				İ	
	Total				150,000.
_	Approved for future payment	<u> </u>	† • • • • • • • • • • • • • • • • • • •		
•	, Approvou for fataro paymont		İ		
					İ
	Total				

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Part XVI	-A Analysis of Income-Produ	cing Activ	vities	•		
	amounts unless otherwise indicated		ated business income	Excluded by	y section 512, 513, or 514	(e)
_	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income
•				1		(See instructions)
				 		
						
			,			
f						
	and contracts from government agencies					
	ship dues and assessments					
	on savings and temporary cash investments					
	ds and interest from securities			-		
	al income or (loss) from real estate		J 2 1 2			ا پر سد دو درات
	-financed property		* *	<u> </u>		- T 4, A 444 A
	debt-financed property					
	I income or (loss) from personal property					 -
	vestment income		-			
	loss) from sales of assets other than inventory		-			
	me or (loss) from special events				,	
	rofit or (loss) from sales of inventory	-				
-	venue a					
е						
12 Subtotal	Add columns (b), (d), and (e)					- 1
13 Total. Ad	dd line 12, columns (b), (d), and (e)				13	
	neet in line 13 instructions to verify calci					
Part XVI-	B Relationship of Activities	to the Ac	complishment of Ex	empt Purp	oses	
Line No.	Explain below how each activity	y for which	h income is reported in	n column (e	e) of Part XVI-A contribi	uted importantly to the
▼	accomplishment of the foundation					
			· · · · · · · · · · · · · · · · · · ·			
					 	
	·					
						
			· -			
			· · · · · · · · · · · · · · · · · · ·			
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Form 990	-PF (2013	3)	SIGNAL FO	JNDATION FOR WIRE	JESS		46-3948	8126 Page 1	13
Part X	VII	Information Resempt Organ		sfers To and Transa	ctions ar	nd Relationsh	ips With Non	charitable	
1 Did	d the o	rganization direct	ly or indirectly er	ngage in any of the follow	ving with a	ny other organiz	ation described	Yes No	<u> </u>
			ode (other than se	ection 501(c)(3) organizat	tions) or in	section 527, rela	ating to political	" xP	£_7
	ganızatı ansfers		g foundation to a	noncharitable exempt or	ganization o	f		*****	
(1)) Cash							1a(1) X	
								1a(2) X	
		nsactions						a number out at \$100.00	لند
(1)) Sales	of assets to a no	ncharitable exemp	ot organization				1b(1) X	
(2)) Purch	ases of assets fro	om a noncharitabl	e exempt organization				1b(2) X	[
(3)) Renta	ıl of facılities, equi	pment, or other a	ssets				1b(3) X	
								1b(4) X	_
								1b(5) X	Ĺ
(6)) Perfo	rmance of service	s or membership	or fundraising solicitations	s			1b(6) X	<u>. </u>
	_		_	, other assets, or paid emp	-				_
				" complete the following					
				es given by the reporting					
va				ment, show in column (c					<u>d</u>
(a) Line r		b) Amount involved	(c) Name of nor	ncharitable exempt organization	- i	scription of transfers	, transactions, and sha	nng arrangements	
		N/A			N/A			·-·	
	<u> </u>								
									_
_									_
									_
									_
									_
						·-··			_
									_
									_
									_
				ated with, or related to,					
				er than section 501(c)(3)	or in section	on 527?		Yes X N	0
<u>b</u> If		complete the follo							
		(a) Name of organizatio	on	(b) Type of organizatio	n	(c)	Description of relation	ship	_
									
						-			
		<u> </u>					No. 10-14-15		_
	Under po correct, a	enalties of perjury, I decl and complete Declaration o	are that I have examine of preparer (other than tax	d this return, including accompanyi payer) is based on all information of w	ng schedules ar hich preparer ha	nd statements, and to s any knowledge	the best of my knowled	ige and belief, it is t	rue
Sign	N			يريمان الأسا		T OLIDED		S discuss this retu	
Here	ı '——	CHARD J. BRE	ZSKI	1 3/30/15	_ ′	ASURER		reparer shown belo	
	Signat	officer or trustee		Date	Title		(see instructio	ns)? X Yes	No
	1	Print/Type preparer's na		Preparer's signature			Ohani I al	PTIN	_
Paid	1	•• • •		r repairs signature		Date	Check if		
	ľΤ	AMMY L FOSKE	II CPA	1		l l	self-employed	P00585181	

215-636-5500

Firm's EIN ▶13-5381590

Phone no

19103

Preparer

Use Only

▶ BDO USA, LLP

PHILADELPHIA, PA

▶ 1700 MARKET STREET, 29TH FLOOR

TAMMY L FOSKEY CPA

Firm's name_

Firm's address

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

Schedule of Contributors

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

► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Name of the organization		Employer identification number
SIGNAL FOUNDATION FO	R WIRELESS	
INNOVATION, INC.		46-3948126
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	a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a pri	vate foundation
	501(c)(3) taxable private foundation	
Note. Only a section 501(c)(/ instructions General Rule	, (8), or (10) organization can check boxes for both the General	Rule and a Special Rule See
General Rule		
_	filing Form 990, 990-EZ, or 990-PF that received, during the year one contributor. Complete Parts I and II	ear, \$5,000 or more (in money or
Special Rules		
under sections 509((3) organization filing Form 990 or 990-EZ that met the 33 1/3 a)(1) and 170(b)(1)(A)(vi) and received from any one contribute, 000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h	or, during the year, a contribution of
during the year, total	(7), (8), or (10) organization filing Form 990 or 990-EZ that red I contributions of more than \$1,000 for use <i>exclusively</i> for religionses, or the prevention of cruelty to children or animals. Comple	ous, charitable, scientific, literary,
during the year, con not total to more tha year for an exclusive	(7), (8), or (10) organization filing Form 990 or 990-EZ that red tributions for use exclusively for religious, charitable, etc., purpoin \$1,000. If this box is checked, enter here the total contribution by religious, charitable, etc., purpose. Do not complete any of the dization because it received nonexclusively religious, charitable, or	oses, but these contributions did ons that were received during the ne parts unless the General Rule etc, contributions of \$5,000 or
990-EZ, or 990-PF), but it mus	is not covered by the General Rule and/or the Special Rules do t answer "No" on Part IV, line 2, of its Form 990, or check the certify that it does not meet the filing requirements of Schedule	box on line H of its Form 990-EZ or on its

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization SIGNAL FOUNDATION FOR WIRELESS **Employer identification number** 46-3948126 INNOVATION, INC.

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_	INTERDIGITAL, INC. 200 BELLEVUE PARKWAY, SUITE 300	\$150,000.	Person Payroll Noncash (Complete Part It 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 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 Payroil 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.)				

Name of organization SIGNAL FOUNDATION FOR WIRELESS INNOVATION, INC.

Employer identification number 46-3948126

		1101.7 11.01					10
Down II	Namescal Drawarts	· /aaa inntrustiana	\	mine of Dowllife			
Part II	Noncash Property	(see instructions). Ose duplicate co	pies of Part II if a	additional s	pace is no	eeaea.

مسجوبي			
(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
		\$	
(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
		\$	

Name of organization SIGNAL FOUNDATION FOR WIRELESS INNOVATION, INC.

Employer identification number

46-3948126

art III	that total more than \$1,000 for the year	, individual contribi ear. Complete colu	utions to section a mns (a) through (e	and the following line entry.			
	For organizations completing Part III, e contributions of \$1,000 or less for the	e year. (Enter this in	formation once. Se	charitable, etc., ee instructions.) ► \$			
	Use duplicate copies of Part III if addition	onal space is neede	ed.				
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
- -							
		(e) Transf	er of alft				
		(0) 1141101	or or give				
	Transferee's name, address, and	d ZIP + 4	Relation	ship 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, an	d ZIP + 4	Relation	nship 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) Transf	er of gift				
	Transferee's name, address, an	nd ZIP + 4	Relatio	nship of transferor to transferee			
				<u> </u>			
(a) No.	<u> </u>			<u> </u>			
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
- -							
		(e) Trans	fer of gift	- 			
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee			
			1				

ATTACHMENT

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS

WILLIAM J. MERRITT

200 BELLEVUE PARKWAY

WILMINGTON, DE 19809

LAWRENCE F. SHAY

DIRECTOR & PRESIDENT

200 BELLEVUE PARKWAY

200 BELLEVUE PARKWAY

200 BELLEVUE PARKWAY RICHARD J. BREZSKI

WILMINGTON, DE 19809

RANAE S. MCELVAINE

GENERAL COUNSEL & SECRETARY

TITLE AND AVERAGE HOURS PER

WEEK DEVOTED TO POSITION

DIRECTOR

WILMINGTON, DE 19809

JANNIE K. LAU

DIRECTOR

WILMINGTON, DE 19809

TREASURER

200 BELLEVUE PARKWAY

WILMINGTON, DE 19809

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ATTACHMENT 2

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

PROTECTION OF INTELLECTUAL PROPERTY

150,000

AMOUNT

NONE

GEORGE MASON UNIVERSITY FOUNDATION, INC 4400 UNIVERSITY DRIVE MS 1A3

FAIRFAX, VA 22030

RECIPIENT NAME AND ADDRESS

TOTAL CONTRIBUTIONS PAID

150,000

ATTACHMENT 2