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# Form **990**

# **Return of Organization Exempt From Income Tax**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Open to Public ▶ Do not enter Social Security numbers on this form as it may be made public. Inspection ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

<u>A</u> _	For the 20	013 cale	ndar year, or tax year	beginning		<u>, 2</u> 013,	and ending	1		, 20			
В	Check if ap	plicable	C Name of organization T	he Wilson	Sonsıni Goodrıch	& Rosati Foun	dation		D Employ	er identification n	umber		
	Address ch	ange	Doing Business As						77-0276529				
$\bar{\Box}$	Name chan	-	Number and street (or P	O box if ma	il is not delivered to st	reet address)	Room/sur	te	E Telepho	ne number			
	Initial return	-	650 Page Mill Road			•	1			(650) 493-9300			
$\exists$			City or town, state or pro	OVINCE COUNT	ry and ZIP or foreign	postal code				(000) 400-0000			
吕	Terminated				ry, and zir or loreign	postal codo			<b>C</b> C	anainta ¢	4 007 540		
	Amended re		Palo Alto, CA 94304			<del></del>		<del></del>	<b>G</b> Gross re	<del>'</del>	1,267,519		
ш	Application	pending	F Name and address of pr	incipal officer	David S. Steue	Г		I		subordinates? Yes			
			same as above							es included? L Yes			
<u></u>	Tax-exemp	t status	✓ 501(c)(3)	501(c) (	) ◀ (insert no )	4947(a)(1) or	<u> </u>		lo," attach a	a list (see instruction	ns)		
<u>J</u>	Website:	N/A						H(c) Group	exemption	number 🕨			
<u>K</u>	Form of orga	anization	Corporation Trust	Associati	ion ☐ Other ►	L Ye	ear of formati	on <b>1990</b>	M State	of legal domicile	CA		
P	art I	Summ	nary										
	1 B	riefly de	escribe the organizati	on's missi	on or most signifi	cant activities	: The pu	pose of this	Foundat	tion is to further	the		
e	p	urpose	of other organizations	which are	organized and op-	erating within t	the meanir	g of section	501(c)(3	)			
ē													
Activities & Governance	2 C	heck th	is box ▶☐ if the orga	anization c	liscontinued its o	perations or d	isposed o	f more than	1 25% of	its net assets.			
Š	III.		of voting members of						з		11		
æ			of independent voting	_					4		11		
es			nber of individuals en	_	-				<u> </u>	· · · · · · · · · · · · · · · · · · ·	0		
Σį	1		nber of volunteers (es		-	•	· ·		6		14		
Ç	II.		elated business rever						7a		<del></del>		
•			lated business reveil						7b				
—	D   N	et unite	ialeu Dusiness laxabi	s income i	TOTT FORTH 990°1,	, 11116 34	<del>- · · · · ·</del>	Prior Ye		Current Y	<u>0</u>		
			tions and grants (Davi	1. //// lung 1	16)		⊢			<del> </del>			
Revenue			tions and grants (Part		1,202,093		<u>1,266,667</u>						
	1		service revenue (Par										
Re	1		ent income (Part VIII, o				_		441		852		
	1		venue (Part VIII, colun										
_	<del>                                     </del>		enue-add lines 8 thro						1,202,534	T	<u>1,267,519</u>		
	1		nd similar amounts pa				• • •  -		930,088		922,466		
			paid to or for membe	•			· . · :  -			<b>_</b>			
es	15 S		other compensation, e				i 5−10)			<u> </u>			
Expenses	<b>16a</b> P	rofessio	onal fundraising fees (	Part IX, co	olumn (A), line 11	e)		T1 (1 t WA)	A MARIE AND A	2 LOAD AND AN AN AND AND	Marian Control		
Š.	b T	otal fun	idraising expenses (Pa	art IX, colu	ımn (D), line 25)  l	<b>-</b>		and the	A STATE OF	The second second			
ш	17   0		penses (Part IX, colur						105		161		
	18 T	otal exp	oenses. Add lines 13-	·17 (must €	equal Rart IX, col	umn (A), line 2	(5) .		930,193	L	922,627		
	<b>19</b> R	levenue	less expenses. Subt	ract line 18	3 from line 12	<u>ري دّ ، ٠٠٠</u>	<u> </u>		272,341		344,892		
5 g				١		1 200 6 133	<u>'</u>	Beginning of Cu	ırrent Year	End of Ye	ar		
Assets or Balances	20 T	otal ass	sets (Part X, line 16)	je	8 MAY 14	2114 3	; L		1,064,513		1,409,405		
t As	21 T	otal liab	oilities (Part X, line 26)	<b>j</b>	. L		4						
Net/	22 N	let asse	ets or fund balances.	Subtract lii	ne 2/1 from line 2(		! [		1,064,513		1,409,405		
P	art II	Signa	ture Block		00.7	*	ĺ						
			ury, I declare that I have exa							my knowledge and	belief, it is		
tru	ie, correct, a	and comp	lete Peclaration of prepare	r (other than	officer) is based on all	information of wh	nich preparer	has any know	ledge				
			Ju. 10 B	har	hw-o1				May !	5, 2014			
Sig	gn	Sign	nature of officer		1			Da					
Here			Sunil Bhardwaj	j	U		Ch	ief Fina	ancial	Officer			
			e or print name and title							-			
_	<u></u>	· · · · · ·	pe preparer's name		Preparer's signature		Da	te	Charat	D ; PTIN			
	Paid Paid Preparer straine				,				Check self-em				
	eparer	Firm's				-		Eirr	n's ElN ▶	<del> </del>			
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Ma	v the IRS		address > s this return with the	orenarer s	hown above? (se	e instructions	)	PIIC	,	<u>\</u> Ye	s No		
_			ection Act Notice see t					0 11282V	•		990 (2013)		

orm 99	0 (2013) <b>P</b> a	ge <b>2</b>
Partil		_
	Check if Schedule O contains a response or note to any line in this Part III	Ц
1	Briefly describe the organization's mission:  The Foundation is organized and operated to make gifts to other section 501(c)(3) organizations which engage in activities which	
	(a) improve the quality of life & the community (b) further the professional & educational interest of the legal profession (c) cond	uct
	charitable, educational and or community activities.	
2	Did the organization undertake any significant program services during the year which were not listed on the	\1_
	prior Form 990 or 990-EZ?	NO
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
•	services?	No
	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured	d by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to othe total expenses, and revenue, if any, for each program service reported.	iers,
	the total expenses, and revenue, if any, for each program correct reported.	
4a	(Code: ) (Expenses \$ 922,466 including grants of \$ 922,466 ) (Revenue \$ )	
	The Foundation has achieved its mission through grants awarded to one hundred seventy-nine 501(c)(3) organizations	
		<b>-</b>
		<b>-</b>
4b	(Code: ) (Expenses \$ including grants of \$) (Revenue \$)	
4c	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$)	
		•••••
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$)	

922,466

4e Total program service expenses ▶

Part	Checklist of Required Schedules			N <sub>2</sub>
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	No
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	<b>√</b>	<b>√</b>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		<i>y</i>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7 8	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i>	7		1
9	complete Schedule D, Part III	8		✓
•	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $V$	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
а	complete Schedule D, Part VI	11a		1
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11e		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<u> </u>	<b>✓</b>
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	-	✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III	19		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	_	1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Pare	Checklist of Required Schedules (continued)			r
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		Yes	No
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	✓	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		✓ ✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	35b		
37	related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
J,	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	1	

art.	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
4.			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	reportable gaming (gambling) winnings to prize winners?	1c	<del>-</del>	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	10		
	Statements, filed for the calendar year ending with or within the year covered by this return  2a			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	,	1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			,
	account)?	4a		✓
b	If "Yes," enter the name of the foreign country: ►			
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			-,-
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		<b>✓</b>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		_
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30		
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year	70		_
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a 9b	<u> </u>	<del> </del>
ь 10	Section 501(c)(7) organizations. Enter:	96	<del>                                     </del>	
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	1		
11	Section 501(c)(12) organizations. Enter:	1		
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	1	l _	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	-		1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	125	-	_
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	<del> </del>	<del>                                     </del>
ь	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,	and i	for a	"No"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			
Section	Check if Schedule O contains a response or note to any line in this Part VI	<del></del>	<del></del>	
Secui	on A. doverning body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b 2	Enter the number of voting members included in line 1a, above, who are independent .    Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		<b>-</b>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		1
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?  Did the organization become aware during the year of a significant diversion of the organization's assets?  Did the organization have members or stockholders?  Did the organization have members, stockholders, or other persons who had the power to elect or appoint	5 6	<b>✓</b>	1
b	one or more members of the governing body?	7a 7b	✓	1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a b 9	The governing body?	8a 8b 9	<b>✓</b>	<b>√</b>
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C		
			Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		<b>-</b>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓	
b 12a b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? <i>If "No,"</i> go to line 13	12a 12b	<b>√</b>	}
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	1	
13 14 15	Did the organization have a written whistleblower policy?	13	<b>√</b>	
a b	The organization's CEO, Executive Director, or top management official	15a 15b		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		1
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed   California  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	n 501	(c)(3)s	only)
19	Own website Another's website Upon request Other (explain in Schedule O)  Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of infinancial statements available to the public during the tax year.	erest	polic	y, and
20	State the name, physical address, and telephone number of the person who possesses the books and records organization:   Gail McFall, Wilson Sonsini Goodrich & Rosati PC, 650 Page Mill Road, Palo Alto, CA 94304 (650) 4			

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Form	$\alpha \alpha \alpha$	/2012	١١

Part VII	Compensation of Officers, Directors,	Trustees, Key Employees, Hig	hest Compensated Employees, and
	Independent Contractors		

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees, and former such persons.

				(C				ited any curren		
(A) Name and Title	(B) Average hours per week (list any	box, ı	ot ch	s pe	more rson	than on the thick the thic	an tee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) David S. Steuer Chairman	part time	✓		<b>✓</b>				0	0	
(2) Allison Spinner Secretary	part time	1						0	0	ĺ
(3) David Thomas Treasurer	part time	· ·		✓						
(4) Sunil Bhardwaj Chief Financial Officer	part time			1				0		1
(5) Colleen Bal Director	part time	<b>√</b>		1				0	0	
(6) David Berger Director	part time	1		1				0	0	
(7) Katharine Martin Director	part time	<b>√</b>		1				0	0	
(8) Vern Norviel Director	part time	1		1				0	0	
(9) Chul Pak Director	part time	1		1				0	0	
(10) Robert Sanchez  Director	part time	1		1				0	0	
(11) Patrick Schultheis Director	part time	1		1			L	0	0	
(12) Robert Suffoletta  Director	part time	1		1				a	0	

	(A) Name and title	(B)  Average hours per week (list any hours for related organizations below dotted	x ce Individua	unles	Pos eck s pe	more rson	than of the state	n an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportabl compensation related organizatio (W-2/1099-M	from	Estir amo ot compe fron organ and r	nated unt of her ensation the ization elated	
		line)	ıstee	lrustee		ж —	pensated					organi	zations	
(15)														
(16)														
(17)				-										
(18)														
(19)														
(20)														-
(21)														
(22)								-				·· _		
(23)														
(24)														
(25)														
1b c d	Sub-total	VII, Sectio	n A				•	<b>&gt; &gt; &gt;</b>	0		0			0
2	Total number of individuals (including bur reportable compensation from the organ	t not limited					abov	e) w	<del></del>	<del></del>		) of		
3	Did the organization list any former of employee on line 1a? If "Yes," complete	ficer, direc						emp	oloyee, or high		nsatec	3	Yes	No
4	For any individual listed on line 1a, is the organization and related organizations individual													
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or inc		5	-	<u> </u>
	on B. Independent Contractors													
1	Complete this table for your five highest compensation from the organization. Rej year.													ıx 
	(A) Name and business add	iress							(B) Description of s	services		(C) Compens	ation	
								╀	· · · <u> </u>			-		
		<u>.</u>						$\vdash$						
2	Total number of independent contractor received more than \$100,000 of compen							o th	nose listed ab	ove) who				

	VIII	Chack if Schodule C			noo or noto t	a anu lina ın thia	Dort VIII		
<del></del>		Check if Schedule C	contains a	a respo	onse or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts ts	1a	Federated campaigns		1a	<del></del>				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .		1b					'
s, G	С	Fundraising events .	<b>)</b>	1c					
ar /	d	Related organizations	•	1d					I
imi	е	Government grants (con		1e				1	
tion sr S	f	All other contributions, g	ıfts, grants,			]		İ	
ibu		and similar amounts not inc	cluded above	1f	1,266,667				
d tr	g	Noncash contributions include		1f \$					
	h	Total. Add lines 1a-1	<u>f</u>	<u> </u>	<u> ▶</u>	1,266,667			
Program Service Revenue				<u> </u>	Business Code				
eve	2a								
e E	b	•••••							
Z.	С			_				-	
နှ	d							ļ	
гап	e	All all							
o Tog	f	All other program ser		_				L	<u> </u>
<u> </u>	<u> </u>	Total. Add lines 2a-2 Investment income						T	<del></del>
		and other similar amo				852			
	4	Income from investmen	-			632			
	5			•	•				
		,	(i) Real		(ii) Personal				
	6a	Gross rents				1		l	
	b	Less: rental expenses							
	С	Rental income or (loss)							
	d	Net rental income or			•				
	7a	Gross amount from sales of	(i) Secunti	es	(II) Other				
		assets other than inventory							
	b	Less. cost or other basis							
		and sales expenses							
	С	Gain or (loss) .							
	d	Net gain or (loss) .			<u> </u>				<u> </u>
evenue	8a	Gross income from fuevents (not including \$							
Other Rev		of contributions reporte See Part IV, line 18 .							
ş	h	Less: direct expenses		` ⊢					(
0		Net income or (loss) f			vents . ►				
		Gross income from ga See Part IV, line 19	aming activit	ties.					
		Less. direct expenses		_		]			
		Net income or (loss) f	-	_	ties ▶				
	10a	Gross sales of in returns and allowance	. a_						
	b	Less: cost of goods s					<del></del> -		
	С	Net income or (loss) f						<u> </u>	<del> </del>
	44-	Miscellaneous F	revenue		Business Code		<del></del>		
	11a			-		<del> </del>		<del>                                     </del>	<del></del>
	Ь			-		+		<del> </del>	
	C d	All other revenue .		├-		<del> </del>		<del> </del>	<del></del>
	e	Total. Add lines 11a-		٠ ـــ			<del></del>	<del> </del>	<del></del>
	12	Total revenue. See in				1,267,519			
				<u> </u>	<del></del>	1,207,013		<u> </u>	Form <b>990</b> (2013)

	0 (2013)			<del></del> <del> </del>	Page 10
	Statement of Functional Expenses n 501(c)(3) and 501(c)(4) organizations must com-	anlote all columns. Al	l other organization	s must complete co	nlump (A)
060170	Check if Schedule O contains a response	<del></del>	<del></del>		· · · · · □
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	922,466	922,466		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
a	Management				
p p	Legal				
q	Accounting				
ė	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				<del></del>
15	Royalties				
16 17	Occupancy				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				<u></u>
19	Conferences, conventions, and meetings				<del></del> -
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				
23	Insurance				
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	Filma Foo	10		10	<del></del>
b	Copy fee	1		1	<del></del>
c	Registration Fee	150		150	
d					
е	A 14 14				
25	All other expenses  Total functional expenses. Add lines 1 through 24e	922,627	922,466	161	
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here    If following SOP 98-2 (ASC 958-720)				

Ρ	art X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Pa	rt X		🚨
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	5,978	1	5,038
	2	Savings and temporary cash investments	1,058,535	2	1,404,367
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees.			]
	6	Complete Part II of Schedule L		5	
s		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	<del></del>
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	ь	Less: accumulated depreciation 10b		10c	· · · · · I
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments-program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,064,513	16	1,409,405
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	· · · · · · · · · · · · · · · · · · ·
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
S	22	Loans and other payables to current and former officers, directors,			
Liabilities		trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25		26	
ces		complete lines 27 through 29, and lines 33 and 34.			
ā	27	Unrestricted net assets		27	
Ba	28	Temporarily restricted net assets		28	
Б	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.		_	<u> </u>
sts	30	Capital stock or trust principal, or current funds	1,064,513	30	1,409,405
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
¥ 7	32	Retained earnings, endowment, accumulated income, or other funds .		32	
Se	33	Total net assets or fund balances	1,064,513		1,409,405
	34	Total liabilities and net assets/fund balances	1,064,513	34	1,409,405
					Form <b>990</b> (2013)

Form 99	00 (2013)				Pa	ge <b>12</b>
Par	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					П
1	Total revenue (must equal Part VIII, column (A), line 12)	1				7,519
2	Total expenses (must equal Part IX, column (A), line 25)	2				2,627
3	Revenue less expenses Subtract line 2 from line 1	3				4,892
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4				4,513
5	Net unrealized gains (losses) on investments	5	_		.,,-	-70.0
6	Donated services and use of facilities	6			·	
7	Investment expenses	7				
8	Prior period adjustments	8		-		
9	Other changes in net assets or fund balances (explain in Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				-	
	33, column (B))	10			1.40	9,405
Part	XII Financial Statements and Reporting				-,	
	Check if Schedule O contains a response or note to any line in this Part XII					
			-		Yes	No
1	Accounting method used to prepare the Form 990: 🗹 Cash 🔲 Accrual 🔲 Other		Γ			
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plaın ır	ī	- 1		
	Schedule O.					i
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		.   2	2a		<b>√</b> '
	If "Yes," check a box below to indicate whether the financial statements for the year were compared to the compared to the statement of the year were compared to the compared					1
	reviewed on a separate basis, consolidated basis, or both:					1
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis					- 1
b	Were the organization's financial statements audited by an independent accountant?		1	2b	-	✓ ¯
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	ed on a	a			
	separate basis, consolidated basis, or both					1
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis					Ì
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	ersigh/	t   ¯		- 1	
	of the audit, review, or compilation of its financial statements and selection of an independent account		1	2c		
	If the organization changed either its oversight process or selection process during the tax year, ex-	plaın ir	י 🖯			

**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

За

3b

Form **990** (2013)

#### SCHEDULE A (Form 990 or 990-EZ)

#### **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

2013

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name	of the organization							Employer id	lentificatio	n number
The	Wilson Sonsini Go								77-02	76529
			rity Status (All orga						nstructio	ons.
The ( 1 2 3	A church, conv	vention of church	tion because it is: (Fones, or association of 170(b)(1)(A)(ii). (Attacspital service organiza	churches h Schedi	describe	ed in sec	tion 170(	(b)(1)(A)(i	).	
4	A medical rese	earch organizatione, city, and state	on operated in conjuncte:	ction with	a hospit	al descril	oed in se	ction 170		
5		n operated for t )(1)(A)(iv). (Comp	the benefit of a collect plete Part II.)	ge or uni	versity ov	wned or	operated	by a go	vernmen	tal unit described in
6 7	An organizatio	n that normally	nment or governmenta receives a substantia <b>(A)(vi).</b> (Complete Par	I part of					nt or fror	m the general public
9	An organization receipts from support from	n that normally activities related gross investme	n section 170(b)(1)(A) receives: (1) more that if to its exempt function int income and unrel fter June 30, 1975. Se	an 33½% ions—sul ated bus	of its subject to desiness tax	upport fro certain ex xable inc	ceptions	s, and (2) ss section	no more	e than 331/3% of its
10 11	An organization	on organized an ne or more pub	operated exclusively of operated exclusive licly supported organ describes the type of s	ely for th	ie benefi describer	t of, to p	perform to	the funct a)(1) or se	ions of, ection 50	9(a)(2). See section
€		ndation manage	II c Type III that the organization ers and other than one	s not co	ntrolled d	rectly or	ındirectl	y by one	or more	
f	If the organization, organization, or		written determination	on from 1	the IRS 1	that it is	a Type	I, Type I	I, or Typ	oe III supporting
ç	-	17, 2006, has th	ne organization accep	oted any	gift or co	ontributio	n from a	iny of the	•	
			ndirectly controls, eithody of the supported of						d in (ii) a 	nd Yes No
	(ii) A family m	ember of a perso	on described in (ı) abo	ve?						11g(ii)
	(iii) A 35% cor	ntrolled entity of	a person described in	(i) or (ii) a	above? .					11g(iii)
ŀ	Provide the fol	llowing informati	on about the supporte	ed organi	zatıon(s).					·
Ø	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col (i) lis	organization sted in your document?	the organ	ou notify nization in of your port?	organizat (i) organi	s the son in col zed in the S?	(vii) Amount of monetary support
				Yes	No	Yes	No	Yes	No	
(A)		i '								
(B)										
(C)										
(D)	<u></u>									
(E)										
				I		]				

Total

Schedule A (Form 990 or 990-EZ) 2013 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in) ▶	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	850,000	850,000	898,596	1,202,093	1,266,667	5,067,356
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	333,833		333,333	.,202,000	1,230,631	0,007,000
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	850,000	850,000	898,596	1,202,093	1,266,667	5,067,356
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						43,398
6	Public support. Subtract line 5 from line 4.						5,023,958
	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	<b>(d)</b> 2012	(e) 2013	(f) Total
7	Amounts from line 4	850,000	850,000	898,596	1,202,093	1,266,667	5,067,356
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	582	382	381	441	852	2,638
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 12	<b>Total support.</b> Add lines 7 through 10 Gross receipts from related activities, etc.	(see instruction	ons)			12	5,069,994
13	First five years. If the Form 990 is for the organization, check this box and stop her	e organization	's first, secon	d, third, fourth	, or fifth tax ye	ear as a sectio	
Secti	on C. Computation of Public Suppor						
14	Public support percentage for 2013 (line 6			1, column (f))		14	99.09 %
15	Public support percentage from 2012 Sch		•			15	99.01 %
16a	331/3% support test—2013. If the organization qual				d line 14 is 331.	/3% or more, cl	
b	331/3% support test—2012. If the organicheck this box and stop here. The organic					15 is 33 <sup>1</sup> /3%	
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization mee Part IV how the organization meets the "forganization	ets the "facts-a acts-and-circu	and-circumsta	nces" test, che st. The organiza	ck this box an	id <b>stop here.</b> E	xplain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizate Explain in Part IV how the organization m supported organization	cion meets the eets the "facts	facts-and-ci s-and-circums	rcumstances" tances" test. T	test, check th	nis box and st	and line
18	Private foundation. If the organization di instructions	d not check a	box on line 13,	, 16a, 16b, 17a			see
			· · · ·	<u> </u>		adula A /Farm 90/	

## Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.)

If the organization fails to qualify under the tests listed below, please complete Part II.)

	if the organization falls to quality	under the te	ists listed beit	ow, please co	ompiete Part	II.)	
	on A. Public Support	2			1		
	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees						
2	received. (Do not include any "unusual grants.")  Gross receipts from admissions, merchandise						
_	sold or services performed, or facilities						
	furnished in any activity that is related to the						
^	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
			-				
4	Tax revenues levied for the organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities	-	1				
J	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3	•					
	received from disqualified persons .						
b	Amounts included on lines 2 and 3				<del></del>		<u> </u>
-	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
0 - 11	line 6.)						
	on B. Total Support	( ) 0000	(1) 0040	( ) 0011	1 1 2 2 4 2	( ) 00/0	<u> </u>
	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
9	Amounts from line 6						
ıva	Gross income from interest, dividends, payments received on securities loans, rents,						
	royalties and income from similar sources .						
b	Unrelated business taxable income (less						
_	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether				1		
	or not the business is regularly carried on				1		
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)		ļ .				
13	Total support. (Add lines 9, 10c, 11,						
14	and 12.)	O OFCODIST!	n'a firat saasa	d though facility		00, 00 0 000	E01/a\/0\
14	organization, check this box and stop he						
Secti	on C. Computation of Public Suppor				<u></u>		
15	Public support percentage for 2013 (line to			3 column (fl)		15	%
16	Public support percentage from 2012 Sch						<del>/6</del>
	on D. Computation of Investment In					1 77 1	
17	Investment income percentage for 2013 (			y line 13, colu	mn (f))	17	%
18	Investment income percentage from 2012			-		18	%
19a	331/3% support tests-2013. If the organ						
	17 is not more than 331/2%, check this box		_	-		_	_
b	331/a% support tests—2012. If the organiz						
	line 18 is not more than 331/3%, check this		_	•			_
20	Private foundation. If the organization di	d not check a	box on line 14,	, 19a, or 19b,	check this box	and see instru	ctions ▶ □

Schedule A (F	orm 990 or 990-EZ) 2013 Page	4
Part IV	<b>Supplemental Information.</b> Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	_
		_
		-
		-
		-
		<b></b> -

# SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

► Attach to Form 990. ► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

2013

**Employer identification number** 

OMB No 1545-0047

Schedule I (Form 990) (2013) Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, **%**□ (h) Purpose of grant or assistance 8 ✓ Yes 77-0276529 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and . . . . . . . . . . . . . (g) Description of non-cash assistance Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (e) Amount of non- (f) Method of valuation cash assistance (book, FMV, appraisal, other) Cat. No 50055P Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (d) Amount of cash grant Enter total number of other organizations listed in the line 1 table (c) IRC section if applicable the selection criteria used to award the grants or assistance? For Paperwork Reduction Act Notice, see the Instructions for Form 990. **General Information on Grants and Assistance** The Wilson Sonsini Goodrich & Rosati Foundation (p) EIN 1 (a) Name and address of organization or government (1) See Attachment Part I Part II 9 N 9 <u>1</u>2 2 E 9 ପ ₹ <u>@</u> 0

Schedule I (Form 990) (2013) Part III Grants a	Part (a)	-	2	9	4	2	9	4	Part IV Sup	The primary recig	The other recipie	not multi-year grants.			
n 990) (2013)  Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.	Part III can be duplicated if additional space is needed.  (a) Type of grant or assistance recepents								Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	The primary recipients of funding from The Wilson Sonsin Goodrich & Rosati Foundation are non-profit legal services organizations that have received funding for several years and with	The other recipients of funding from The Wilson Sonsini Goodrich & Rosati Foundation are typically smaller grants to non-profit organizations for general operating support that are	ants.			
lividuals in the Ur	space is needed. (b) Number of recipients								the information re	in Goodrich & Rosat	i Goodrich & Rosati F				
nited States. Con	(c) Amount of cash grant								quired in Part I, Iir	i Foundation are non	oundation are typica				
plete if the organiz	(d) Amount of non-cash assistance								ie 2, Part III, columr	-profit legal services o	lly smaller grants to no				
ation answered "Yes" to	(e) Method of valuation (book, FMV, appraisal, other)								ı (b), and any other addi	ganizations that have receiving the receivin	n-profit organizations for ge				
Page Form 990, Part IV, line 22.	(f) Description of non-cash assistance								tional ınformation.	ved funding for several years and with	neral operating support that are				

#### SCHEDULE O (Form 990 or 990-EZ)

#### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No 1545-0047 2013

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization	Employer Identification number
The Wilson Sonsini Goodrich & Rosati Foundation	77-0276529
Part VI	
	······································
6 & 7 The organization has one class of members: the shareholders of Wilson Sonsini Goodrich & F	Rosati. PC.
11b This Form 990 was prepared by the administrator and Chief Financial Officer of the Foundation	and raviewed by all members of the
The first own over the property of the definition and other manifest of the Foundation	and reviewed by an members of the
Board of Directors.	
Board of Directors.	
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12c The member of the Board of Directors of the Foundation disclose annually.	
The member of the Board of Directors of the Foundation disclose annually.	
19 The Foundation's governing documents, conflict of interest policy, and financial statements are	available upon request
The Foundation's governing documents, conflict of interest policy, and financial statements are	svanable upon request.
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THE WILSON SONSINI GOODRICH & ROSATI FOUNDATION 2013 FORM 990 - RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX EMPLOYER IDENTIFICATION NUMBER: 77-0276529 DECEMBER 31, 2013

SCHEDULE I - Grants and Other Assistance to Organizations, Governments, and PART II - LINE #1 - Grants made in excess of \$5,000

#	(a) Name of Organization or government	(a) Address of Organization or government	(b) EIN	(c) IRC section	(d) Amount of cash grant	(h) Purpose of grant or assistance
1	Bay Area Legal Aid	1735 Telegraph Avenue, Oakland, CA 94612	94-1631316	501(c)(3)	80,500.00	General Operating Support
2	Law Foundation of Silicon Valley	152 North Third Street, 3rd Floor, San Jose, CA 95112	52-1014754	501(c)(3)	78,250.00	General Operating Support
3	Regents of the University of California, Berkeley	University of California, Berkeley School of Law, Telegraph Research & Administration Center, Attn: BCLBE, 2850 Telegraph Avenue, Suite 500, Berkley, CA 94705-7220	94-6002123	501(c)(3)	35,000.00	General Operating Support
4	Legal Aid Society of San Mateo County	330 Twin Dolphin Drive, Suite 120, Redwood City, CA 24065	94-1451894	501(c)(3)	24,500.00	General Operating Support
5	Lawyers Committee for Civil Rights of the San Francisco Bay Area	131 Steuart Street, Suite 400, San Francisco, CA 94105	94-2581415	501(c)(3)	24,300.00	General Operating Support
6	Second Harvest Food Bank of Santa Clara & San Mateo Cos.	4001 North First Street, San Jose, CA 95134	94-2614101	501(c)(3)	20,000 00	General Operating Support
7	Volunteer Legal Services Program	301 Battery Street, Third Floor, San Francisco, CA 94111	94-2931349	501(c)(3)	19,000.00	General Operating Support
8		Harvard Law School, 125 Mount Auburn Street, Cambridge, MA 02138	83-0403915	501(c)(3)	16,875.00	General Operating Support
9	Legal Aid Society - Employment Law Center	180 Montgomery Street, Suite 600, San Francisco, CA 94104	94-2783401	501(c)(3)	15,000.00	General Operating Support
10	Ronald McDonald House at Stanford	520 Sand Hill Road, Palo Alto, CA 94304	94-2538615	501(c)(3)	14,750 00	General Operating Support
11	Center for Justice & Accountability	870 Market Street, Suite 682, San Francisco, CA 94102	94-3299686	501(c)(3)	14,250 00	General Operating Support
12	Smuin Ballet	44 Gough Street, Suite 103, San Francisco, CA 94103	94-3197247	501(c)(3)	13,050 00	General Operating Support
13	San Francisco Symphony	Davis Symphony Hall, San Francisco, CA 94102	94-1156284	501(c)(3)	12,600.00	General Operating Support
14	InnVision Shelter Network	North Bay Administrative Office, 19 Constitution Drive, Menlo Park, CA 94025	77-0160469	501(c)(3)	12,500.00	General Operating Support
15	Human Rights First	Benefit Office, 411 East 83rd Street, Suite 3F, New York, NY 10028	13-3116646	501(c)(3)	11,100.00	General Operating Support
16	Boys & Girls Club of the Peninsula	401 Pierce Road, Menlo Park, CA 94025	94-1552134	501(c)(3)	10,000.00	General Operating Support
17	California Bar Foundation	180 Howard Street, San Francisco, CA 94105	94-3104546	501(c)(3)	10,000.00	Scholarship Activities
18	Legal Aid of Western Ohio Inc	525 Jefferson Avenue, Suite 400, Toledo, OH 43604	34-1485732	501(c)(3)	10,000.00	General Operating Support
19	Rebuilding Together Peninsula	P. O Box 4031, Menlo Park, CA 94026-4031	94-3106209	501(c)(3)	10,000.00	General Operating Support
20	Sky's the Limit Fund	101 First Street, Suite 155, Los Altos, CA 94022	27-2592172	501(c)(3)	10,000.00	General Operating Support
21	United States Fund for UNICEF	125 Maiden Lane, New York, NY 10038	13-1760110	501(c)(3)	10,000.00	General Operating Support
22	Western Center on Law & Poverty	3701 Wilshire Boulevard, Suite 208, Los Angeles, CA 90010-2826	95-2897721	501(c)(3)	10,000.00	General Operating Support
23	Theatre Works	P. O,. Box 50458, Palo Alto, CA 94303	94-2831245	501(c)(3)	9,960.00	General Operating Support
24	Girl Scouts of Northern California	7700 Edgewater Drive, Suite 340, Oakland, CA 94621	94-1551410	501(c)(3)	9,505.00	General Operating Support
25	Equal Justice Society	1999 Harrison Street, Suite 800, Oakland, CA 94612	20-0490698	501(c)(3)	9,400.00	General Operating Support
26	ACLU Foundation of Southern California	1313 West Eighth Street. Los Angeles, CA 90017	95-2673361	501(c)(3)	9,340.00	General Operating Support

Prepared by: Elizabeth Ditty

THE WILSON SONSINI GOODRICH & ROSATI FOUNDATION 2013 FORM 990 - RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX EMPLOYER IDENTIFICATION NUMBER: 77-0276529 DECEMBER 31, 2013

SCHEDULE I - Grants and Other Assistance to Organizations, Governments, and PART II - LINE #1 - Grants made in excess of \$5,000

#	(a) Name of Organization or government	(a) Address of Organization or government	(b) EIN	(c) IRC section	(d) Amount of cash grant	(h) Purpose of grant or assistance
27	Public Advocates	131 Steuart Street, Suite 300, San Francisco, CA 94105	23-7103042	501(c)(3)	9,250.00	General Operating Support
28	Board of Trustees of the Leland Stanford Junior University	Stanford Women's Cancer Center, Office of Medical Center Development, 3172 Porter Drive, Suite 210, Palo Alto, CA 94304	94-1156365	501(c)(3)	9,000 00	General Operating Support
29	San Francisco Ballet Association	455 Franklin Street, San Francisco, CA 94102	94-1415298	501(c)(3)	8,900.00	General Operating Support
30	Santa Clara University	Katharine & George Alexander Community Law Center, 1030 The Alameda, San Jose, CA 95126	94-1156617	501(c)(3)	8,750.00	General Operating Support
31	Foundation Fighting Blindness	2800 28th Street, Suite 310, Santa Monica, CA 90405	23-7135845	501(c)(3)	7,888.00	General Operating Support
32	San Francisco Opera Association	301 Van Ness Avenue, San Francisco, CA 94102	94-0836240	501(c)(3)	7,832.00	General Operating Support
33	Community Legal Services in East Palo Alto	1861 Bay Road, East Palo Alto, CA 94303	22-3866910	501(c)(3)	7,500.00	General Operating Support
34	Juvenile Diabetes Research Foundation	Greater Bay Area Chapter, 49 Stevenson Street, Suite 1200, San Francisco, CA 940105	23-1907729	501(c)(3)	7,500.00	General Operating Support
35	Anti-Defamation League	Central Pacific Region, 720 Market Street, Suite 800, San Francisco, CA 94102	13-1818723	501(c)(3)	6,300 00	General Operating Support
36	Sanctuary for Families	P O Box 1406, Wall Street Station, New York, NY 10268	13-3193119	501(c)(3)	6,150.00	General Operating Support
37	MinKwon Center for Community Action	136-19 41st Avenue, 3rd Floor, Flushing, NY 11355	11-2710506	501(c)(3)	5,870.00	General Operating Support
38	National Center for State Courts	300 Newport Avenue, Williamsburg, VA 23185-4147	52-0914250	501(c)(3)	5,500.00	General Operating Support