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

OMB No. 1545-0047

2013

Open to Public

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

▶ Do not enter Social Security numbers on this form as it may be made public.

Inten	nal Revenue	Service	<u> </u>	on about Fo	rm 990 and its	instructions is	at www.li	s.gov/for	<u>m990</u> .	·	Inspection		
A	For the 2	013 cale	endar year, or tax year b				, and end	-			, 20		
В	Check if a	f applicable: C Name of organization The Orrick, Herrington & Sutcliffe Foundation D Employer Identification number											
	Address c	hange	Doing Business As								94-3372036		
	Name cha	nge	Number and street (or P O. box if mail is not delivered to street address)  Room/suite  E Telephone number										
	Initial retur	n	2121 Main Street 304-231-2766										
	Terminate	d	City or town, state or prov	vince, country,	and ZIP or foreig	n postal code							
	Amended	whended return Wheeling, WV 26003 Gross receipts \$											
	Application	n pending	F Name and address of prin	ncipal officer		•		H(a) Is	this a gro	up return for su	ubordinates? 🗌 Yes 🗹 No		
			Mitch Zuklie					Н(ъ) А			included? 🗌 Yes 🔲 No		
<u> </u>	Tax-exem	pt status:	<b>☑</b> 501(c)(3)	501(c) (	) ◀ (insert no	) 🗌 4947(a)(1) or	r 🗌 527		If "No	," attach a	list. (see instructions)		
<u>J</u>	Website:	► N/A	·					H(c) (	Group e	exemption r	number >		
K	Form of on	ganization:	Corporation Trust	Association	☐ Other ►	LY	ear of form	ation.	1999	M State o	of legal domicile CA		
P	art I	Summ	nary	-									
	1 E	Briefly de	escribe the organizatio	n's mission	or most signi	ficant activitie	S: See	Attached	Sheet				
8													
ш													
/en	2	Check th	nis box ▶ 🗌 ıf the orga	nizatıon dis	continued its	operations or	disposed	of more	than	25% of i	ts net assets.		
ő	3 1	Number •	of voting members of	the governi	ng body (Part	VI, line 1a).				3	<del>-</del>		
Activities & Governance	4 1	Number -	of independent voting	members o	of the governing	ng body (Part '	VI, line 1t	o)		4	•		
ties	5 1	otal nur	mber of individuals em	ployed in c	alendar year 2	013 (Part V, li	ne 2a)			5			
ξ	6 1	otal nur	mber of volunteers (est	timate if ne	cessary)					6			
Ac	7a 7	Total unr	related business reven	ue from Pa	rt VIII, column	(C), line 12				7a			
			lated business taxable			, ,				7b			
								Pı	ior Yea	ar	Current Year		
•	8 (	Contribu	itions and grants (Part	VIII. line 1h	)					909765	104478		
ž	1		service revenue (Part							303703			
Revenue			ent income (Part VIII, c			7d) /							
æ			venue (Part VIII, colum							-			
			enue-add lines 8 thro					<del></del>		909765	404470		
			ind similar amounts pa					1		909768	104478; 104478;		
			paid to or for member			. / ' ^ \		<b></b>		303766			
/A	1 1		other compensation, er				s 5≥10)*	1			<del> </del>		
Se	16a		onal fundraising fees (F										
Expenses	ь -		ndraising expenses (Pa					3 3 E.	- 1 to	45.62	14		
Ä	17 (		penses (Part IX, colum			210		6 6 70	-24 24	, A 2	, ,		
	1		penses. Add lines 13-1	• •		· 4*	25)						
	1		e less expenses. Subtra	-		, , , , , , , , , , , , , , , , , , ,	23) .	-		909768	104478		
	<del></del>	16vei lue	riess expenses. Subtre	act line to i	TOTTI III E 12 .	• • • • •	· · ·	Reginning	of Cur	rent Year	End of Year		
ts or		Fotal age	sets (Part X, line 16)						,				
S E	20									0			
Net Assets Fund Balan	21 22		bilities (Part X, line 26)								·		
			ets or fund balances. S	ubtract line	21 Irom line	20	<del></del>			0			
	art II		ture Block			<del></del>							
Un tru			ury, I declare that I have examplete Declaration of preparer								ly knowledge and belief, it i		
<u> </u>		L L	C.A. Ox V	1) 0									
				ul.									
Siç	_	Sign	nature of officer	Nelse 1	- Tan	Directo			Dat	е	11/14/14		
He	ere	_	( harles J.	100561	- 1 455	DIVERT					7177		
		<del></del>	e or print name and title	· · · · · · · · · · · · · · · · · · ·	<del> </del>					т	low.		
Pa	aid	Print/Ty	ype preparer's name	Pr	eparer's signature	9		Date		Check [			
	eparer	·							<del></del>	self-emp	loyed		
	se Only		name ►	,					Firm	's EIN ▶			
_			address >						Phor	ne no.			

May the IRS discuss this return with the preparer shown above? (see instructions)

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No 11282Y

☐ Yes ☐ No Form **990** (2013)

rm 99	0 (2013)			Page 2
art	II Statement of Program Service Acc			
	Check if Schedule O contains a resp	onse or note to any line in this P	art III	<u> L</u>
1	Briefly describe the organization's mission:			
	See Attached Sheet			
2	Did the organization undertake any significa			
	prior Form 990 or 990-EZ?		· · · · · · · · · · · · · · · · · · ·	es 🗹 No
3	Did the organization cease conducting, of services?	or make significant changes in h		es 🗹 No
	If "Yes," describe these changes on Schedu			
4	Describe the organization's program service expenses. Section 501(c)(3) and 501(c)(4) of the total expenses, and revenue, if any, for the total expenses is a service of the total expenses.	rganizations are required to report		
4a	(Code:) (Expenses \$104	4783 including grants of \$	1044783 ) (Revenue \$104	<u>4783</u> )
			••••••	
4b	(Code:) (Expenses \$	including grants of \$	) (Revenue \$	
			······································	
		•		
			***************************************	
4c	(Code: ) (Expenses \$	including grants of \$	) (Revenue \$	)
		***************************************		
4d	Other program services (Describe in Sched		, <b>¢</b> \	
4e	(Expenses \$ including gran	its of \$ ) (Revenue	J J	

Form 99	0 (2013)		F	age 3
Part	V Checklist of Required Schedules			
•	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
1	complete Schedule A	1	,	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	~	
3	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		~
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		,
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		v
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		~
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		~
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		~
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a 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		,
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		,
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X as applicable.	100		**
а		11a	ئىگ	~
b	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		,
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		,
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		~
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		V
f	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.	11f		~
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		~
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		~
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	ļ	~
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	ļ	~
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		,
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		~
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		,
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		~
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		,
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		~
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		~

Form 99	0 (2013)		1	Page 4
Part	V Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	<b>01</b>	Yes	No
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	21		~
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		,
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		v
	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		
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		v
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		
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		,
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		,
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		V
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		~
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	30		V
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		v
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		,
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		v
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		v
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		V
37	related organization? If "Yes," complete Schedule R, Part V, line 2	36		-
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,  Part VI	37		-
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	,	

Form **990** (2013)

Part	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								
_			Yes	No					
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a								
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable								
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?								
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c							
20	Statements, filed for the calendar year ending with or within the year covered by this return  2a								
b	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)	20		_					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~					
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									
	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	L	1					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~					
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6-							
b	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		-					
U	gifts were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).	00							
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	İ							
	and services provided to the payor?	7a		1					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		-					
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was								
	required to file Form 8282?	7c		~					
d	If "Yes," indicate the number of Forms 8282 filed during the year								
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7е		~					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		~					
9	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	İ							
	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.	-	-	<del> </del>					
а	Did the organization make any taxable distributions under section 4966?	9a							
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		1					
10	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12		ļ						
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:								
а	Gross income from members or shareholders								
þ	Gross income from other sources (Do not net amounts due or paid to other sources								
	against amounts due or received from them.)	J							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	<b>├</b> ─	<del> </del>					
12	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	-							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a	<del> </del>	-					
а	Is the organization licensed to issue qualified health plans in more than one state?	134	<del>                                     </del>	<del> </del>					
b	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		1						
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		$L^{-}$					
h	If "Ves " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h							

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response or note to any line in this Part VI	ee ins	for a	ions.				
Secti	on A. Governing Body and Management							
4.			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							
3	any other officer, director, trustee, or key employee?  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	<u> </u>	,				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		~				
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		1				
6	Did the organization have members or stockholders?	6		~				
7a	7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?							
b	stockholders, or persons other than the governing body?							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:							
a	The governing body?	8a	~					
9	Each committee with authority to act on behalf of the governing body?	8b						
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		/				
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.					
4.0	<b>7</b>		Yes	No				
10a b	Did the organization have local chapters, branches, or affiliates?	10a		~				
_	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	V					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		~				
c	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12b						
13	describe in Schedule O how this was done	12c	<u> </u>	-				
14	Did the organization have a written document retention and destruction policy?	14		V				
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official	15a		1				
b	Other officers or key employees of the organization	15b		1				
16a	and and an animal and an animal and an animal and an animal and an animal anima							
b	with a taxable entity during the year?	16a		~				
<del></del>	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						
<u>Secti</u>	on C. Disclosure  List the states with which a copy of this Form 990 is required to be filed ▶ California							
18	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.	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 int	erest	polic	y, and				
20	financial statements available to the public during the tax year.  State the name, physical address, and telephone number of the person who possesses the books and records	of +5						
	organization: ► Cindy Shipley. 2121 Main Street. Wheeling, WV 26003-2809, 304-231-2733	or title	<i>-</i>					

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Р	8	a	8	•

Form 990 (2013)

Part VII	Compensation of Officers, Directors, Truste	es, Key Employees, Highest Compensated Employees,	and
	Independent Contractors		

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 employees."
- 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.

Check this box if neither the organization nor	any relate	d orga	aniz	atio	n co	ompe	nsa	ted any currer	t officer, director	, or trustee.
(A) Name and Title	(B) Average hours per week (list any	box,	unles	s pe	tion more	than o	an (ee)	I	(E) Reportable compensation from related	- (F) Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former		organizations (W-2/1099-MISC)	compensation from the organization and related organizations
_(!)_Mitch Zuklie		v		٧				0	0	0
(2) Alan G, Beniamin		,						0	0	0
(3) J. Peter Coll		,							0	
(4) Carl F. Lyon		,							0	
(5) Mike Torpey		~								0
(6) Larry Low		~		v						0
(?) Linda Hayard				,					0	
(8)										
(9)						<u> </u>				
(10)										
(11)						_		·		
(12)		-								
(13)						_				
(14)			-							

Part	VI Section A. Officers, Directors, Trus	tees, Key E	mploy	/865			lighes	st C	ompensated E	mployees (co	ontinue	d)		_
	(A) Name and title	(B) Average hours per week (list any	Ďοx, ι	untes	Pos leck s pe	rson	than o is both	าลก	(D) Reportable compensation from	(E) Reportable compensation from related organizations (W-2/1099-MISC)		(F) Estimated amount of other		
		hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)			compe from organ and r	nsation the ization elated zations	
(15)														
(16)					_									
(17)														
(18)														
(19)										<u> </u>				
(20)						_		-						
(21)						_								
(22)			_											
(23)				_									_	
(24)														
(25)														
1b c	Sub-total	VII, Sectio	n A					<b>&gt; &gt; &gt;</b>						
2	Total number of individuals (including bu reportable compensation from the organ	t not limited							ho received m	ore than \$10	0,000 c	of		
3	Did the organization list any former of employee on line 1a? If "Yes," complete	ficer, direc									sated	3	Yes I	No ✓
4	For any individual listed on line 1a, is the organization and related organizations	sum of re	portal	ble (	con	npe	nsatio	n a	nd other comp	ensation fro				<u> </u>
5	individual	or accrue co	mpe	nsat	tion	fro	m any	un/	related organiz	zation or indi-	vidual	4		1
Section	for services rendered to the organization on B. Independent Contractors	? If "Yes," c	ompl	ete	Sch	nedu	ıle J t	for s	such person	<u></u>	•	5		<b>/</b>
1	Complete this table for your five highest compensation from the organization. Repyear.													(
	(A) Name and business add	fress							(B) Description of s	ervices	C	(C) ompens	ation	
None											_			0
													-	
2	Total number of independent contractor	are finaludia	na hi	rt r	ot I	limit	ad to		noce listed sh	ove) who				<u> </u>
_	received more than \$100,000 of compen									2.0, 11.10				

VIII	Statement of Revenue		•			rage S
		onse or note to	any line in this	Part VIII		П
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
1a b c d e f	Federated campaigns 1a  Membership dues 1b  Fundraising events 1c  Related organizations 1d  Government grants (contributions)  All other contributions offs grants					
g	and similar amounts not included above 1f  Noncash contributions included in lines 1a-1f: \$	1044783				
<u>h</u>	Total. Add lines 1a-1f	▶	1044783			
		Business Code				
2a b c d e	All other program service revenue					
-						
3 4 5 6a b c d 7a b	Investment income (including divider and other similar amounts)	nds, interest,				
9a b c 10a b c 11a b c d e	events (not including \$ of contributions reported on line 1c). See Part IV, line 18	ntory > Business Code				
	1a b c d e f g h 2a b c d e f g 3 4 5 6a b c d 7a b c d 8a b c 9a b c d 10a b c d	Check if Schedule O contains a responsible of the contributions and service revenue.  Total. Add lines 2a–2f  Investment income (including divider and other similar amounts)  Income from investment of tax-exempt bors.  Repated income or (loss)  Net rental income or (loss)  Net gain or (loss)  Regard (noss)  Regard (noss	Check if Schedule O contains a response or note to the control of	Check if Schedule O contains a response or note to any line in this    Total   Check if Schedule O contains a response or note to any line in this Part VIII    Total Personal   Total Personal	Check if Schedule O contains a response or note to any line in this Part VIII.    Part   Par	

	Statement of Functional Expenses								
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).  Check if Schedule O contains a response or note to any line in this Part IX									
	Check if Schedule O contains a respon								
	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	1044783	1044783		1				
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								
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	Other salaries and wages				-				
8	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):				-				
а	Management								
b	Legal								
С	Accounting				<u> </u>				
d	Lobbying								
е	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								
15	Royalties								
16	Occupancy								
17	Travel								
18	Payments of travel or entertainment expenses for any federal, state, or local public officials								
19	Conferences, conventions, and meetings .								
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.)								
a									
b									
C									
d	All sales								
е	All other expenses				<del> </del>				
<u>25</u>	Total functional expenses. Add lines 1 through 24e	1044783	1044783						
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)   if the only if the organization column is the control of the column is								

	1 990 (20				Page 1
Р	art X			_	
_		Check if Schedule O contains a response or note to any line in this Pa	AT X		
	1	Cash—non-interest-bearing	0	1	
	2	Savings and temporary cash investments		2	
	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. Complete Part II of Schedule L		5	
Assets	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	6		
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9 10a	Prepaid expenses and deferred charges		9	
		other basis. Complete Part VI of Schedule D		i	
	ь	Less: accumulated depreciation 10b		10c	
	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	<del></del>
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	0	16	
	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	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and			
<u>.</u>		disqualified persons. Complete Part II of Schedule L		22	
_	23 24	Secured mortgages and notes payable to unrelated third parties		23	
	25	Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third		24	<del></del>
	25	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		25 26	
	20	Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 27 through 29, and lines 33 and 34.		20	
JUC.	27	Unrestricted net assets		27	
3al:	28	Temporarily restricted net assets		28	
9	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.			
ts	30	Capital stock or trust principal, or current funds		30	
3Se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ę	32	Retained earnings, endowment, accumulated income, or other funds .		32	
Ž	33	Total net assets or fund balances	0	33	

Total liabilities and net assets/fund balances . .

34

	Pa	ge 12
		П
<del></del>	10	44783
		44783
		0
		0
		0
	Yes	No
		1
2a		

Par	Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>	<u>.</u>	. 🗆			
1	, , , , , , , , , , , , , , , , , , , ,	1		10	44783			
2		2			44783			
3								
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4							
5		5						
6		6						
7		7						
8		8						
9		9						
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line							
		10			0			
Part	XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		. 🗆			
				Yes	No			
1	Accounting method used to prepare the Form 990:  Cash Cash Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain	ain in						
	Schedule O.							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .		2a		1			
	If "Yes," check a box below to indicate whether the financial statements for the year were compile	ed or						
	reviewed on a separate basis, consolidated basis, or both:			ĺ				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		2b		V			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited	on a						
	separate basis, consolidated basis, or both:			ĺ	İ			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis							
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over							
	of the audit, review, or compilation of its financial statements and selection of an independent account		2c					
	If the organization changed either its oversight process or selection process during the tax year, explicitly	aın in						
	Schedule O.							
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set fo	rth in						
	the Single Audit Act and OMB Circular A-133?		3a		V			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not underg							
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such aud	lits.	3ь	ĺ				

Form 990 (2013)

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 th	e organization							Employer ic	dentification	n number		
		Sutcliffe Founda		<del> </del>	<del> </del>			<del></del>		92036		
Part I			rity Status (All orga						nstructio	ons.		
1 🔲	A church, con	vention of churc	ition because it is: (Fo hes, or association of 170(b)(1)(A)(ii). (Attac	churches	s describe				).			
			spital service organiza			section 1	і70(Ы(1)	(A)(iii).				
4 🗍	A medical rese	earch organization	on operated in conjun	ction with	a hospit	al descri	bed in se	ction 17	D(b)(1)(A)	(iii). Ente	er the	
	hospital's nam	ne, city, and state	е:							• •		
	section 170(b	) <b>(1)(A)(iv).</b> (Com <sub>l</sub>	•						vernmen	tal unit o	lescrib	ed in
7 🗾	An organization	on that normally	nment or government receives a substantia (A)(vi). (Complete Par	al part of					nit or fron	n the ge	neral r	oublic
8 🔲	A community t	trust described i	n section 170(b)(1)(A	)(vi). (Cor	nplete Pa	ırt II.)						
9 🗆	An organization receipts from support from	on that normally activities related gross investme	receives: (1) more that d to its exempt funct ent income and unre fter June 30, 1975. Se	an 331/3% ions—sul lated bus	6 of its su bject to d siness ta:	upport fro certain ex xable inc	come (les	s, and (2) ss sectio	no more	e than 3	31/3%	of its
10 🔲	An organizatio	n organized and	operated exclusively	to test fo	or public s	safety. Se	e sectio	n 509(a)(	(4).			
11 🔲	An organization purposes of o	on organized ar one or more pub	nd operated exclusive blicly supported organ describes the type of	ely for th	ne benefi describe	t of, to p	perform to to to to to to to to to to to to to	the funct a)(1) or se	tions of, ection 50	9(a)(2). S	arry ou See <b>se</b>	ıt the •ction
	a 🗌 Typel	<b>b</b> 🗌 Type						Type III-			ntegra	ted
e 🗌	By checking the	his box, I certify indation manage	that the organizationers and other than one	is not co	ntrolled d	- lirectly or	indirectl	y by one	or more	disqualit	ied pe	rsons
			a written determination	on from	the IRS 1	that it is	a Type	I. Type	II. or Tvr	ne III su	pportii	na
		check this box .										
	Since August following pers		he organization acce	pted any	gift or co	ontributio	n from a	any of the	e			
	(iii) below,	the governing bo	ndirectly controls, eithody of the supported	organizat	ion?		·				Yes i)	No
	(ii) A family m	ember of a perso	on described in (i) abo	ove?						11g(i	ŋ	
	(iii) A 35% cor	ntrolled entity of	a person described in	ı (ı) or (ıi) :	above?.					11g(i	iŋ	
<u>h</u>	Provide the fo	llowing informati	on about the support	ed organ	ızatıon(s).							
• • •	e of supported ganization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	in col (I) li	organization sted in your document?	the organ	rou notify nization in of your port?	organiza (i) organi	Is the tion in col ized in the S ?	(vii) Amou	unt of mo	onetary
				Yes	No	Yes	No	Yes	No			
(A)												
(B)												
(C)												<del></del>
(D)												
(E)												
	<del></del>											
Total							1			1		

Part		tions Descri	ibed in Secti	ons 170(b)(1	)(A)(iv) and 1	70(b)(1)(A)(vi	<u> </u>
	(Complete only if you checked the	ne box on line	5, 7, or 8 of	Part I or if the	e organizatio	n failed to qua	alify under
Coati	Part III. If the organization fails to	qualify unde	r the tests lis	ted below, p	lease comple	te Part III.)	
	on A. Public Support	(-) 0000	0) 0040	( ) 0044	(0.0010		
Calen 1	dar year (or fiscal year beginning in)  Gifts, grants, contributions, and	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
'	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")	400000	2020	4000500		4044-00	
2	Tax revenues levied for the	1605000	2068	1023526	909765	1044783	4585142
•	organization's benefit and either paid to or expended on its behalf			:			
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	1605000	2068	1023526	909765	1044783	4585142
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)	_					
6	Public support. Subtract line 5 from line 4.						
Secti	on B. Total Support						
Caler	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
7	Amounts from line 4	1605000	2068	1023526	909765	1044783	4585142
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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	Total support. Add lines 7 through 10						4585142
12	Gross receipts from related activities, etc.					12	
13	First five years. If the Form 990 is for the				-		
Casi	organization, check this box and stop he		• • • •	· · · · ·	· · · · ·	· · · · ·	<u> </u>
	on C. Computation of Public Suppor						
14 15	Public support percentage for 2013 (line 6					14	100 %
16a	Public support percentage from 2012 Schedule A, Part II, line 14						
b							
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part IV how the organization meets the "f organization	013. If the orga	nization did no and-circumsta	ot check a box	on line 13, 16 eck this box ar	nd stop here. E	line 14 is Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization memory is provided in Part IV how the organization memory supported organization	tion meets the leets the "facts	"facts-and-ci	rcumstances" tances" test. T	test, check th	ns box and st	, and line op here.
18	Private foundation. If the organization di instructions	d not check a	box on line 13	, 16a, 16b, 17a		k this box and	

### 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.)

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.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the		İ				
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513		1				
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						
	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 .						
þ	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
_	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
Cooti	line 6.)		<u> </u>		<u> </u>	<u></u>	
	on B. Total Support	(=) 0000	(F) 0010	4-3-0044	4.0040	( ) 0040	- <del></del>
9	dar year (or fiscal year beginning in)  Amounts from line 6	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	_	-	<del> </del>				
iva	payments received on securities loans, rents,						
	royalties and income from similar sources .						
ь	Unrelated business taxable income (less			· <del>-</del>			
_	section 511 taxes) from businesses						
	acquired after June 30, 1975			,			
С	Add lines 10a and 10b		<del> </del>				
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for the	•	·	•			` '' '
	organization, check this box and stop he		<del></del>		· · · · ·		🕨 🔲
_	on C. Computation of Public Support						·
15	Public support percentage for 2013 (line					<del></del>	%_
16	Public support percentage from 2012 Sci	nedule A, Part	III, line 15 .	<del></del>	<u>· · · · · · · · · · · · · · · · · · · </u>	_   16	<u> </u>
	on D. Computation of Investment In				(0)	4-	
17	Investment income percentage for 2013 (						<u>%</u>
18 10a	Investment income percentage from 2012						% and line
19a	331/a% support tests—2013. If the organ 17 is not more than 331/a%, check this box						
h							_
b	331/a% support tests—2012. If the organization 18 is not more than 331/a%, check this						
20	Private foundation. If the organization di						
20	Fire organization of	о посспеск а	DOX ON line 14	, 19a, OF 19D, (	JNECK INIS DOX	and see instru	Cuons -

Schedule A (F	rom 990 or 990-E∠) 2013	Page 4
Part IV	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12. Also complete this part for any additional information. (See instructions).	and
•		
•••••••		
	······································	
•••••		
		•••••
••••		

## SCHEDULEI (Form 990)

Grants and Other Assistance to Organizations, Governments. and Individuals in the United States

20 1 Section OMB No. 1545-0047

		ď	Complete if the organ	nization answered '	Yes" to Form 990.	the organization answered "Yes" to Form 990. Part IV. line 21 or 22	_•		
		1		► Attach to Form 990.	Form 990.			Open	Open to Public
Department of the Treasury Internal Revenue Service		► Infor	mation about Sche	dule I (Form 990) an	d its instructions is	► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.		dsul	ection
Name of the organization								Employer Identification number	ımper
The Orrick, Herrington & Sutcliffe Foundation	& Sutcliffe Four	ndation						94-3372036	
Part I General	Information	General Information on Grants and Assistance	Assistance						
1 Does the organ	nization mainta	Does the organization maintain records to substantiate	stantiate the amou	int of the grants or	assistance, the g	rantees' eligibility fo	the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	ance, and	<u>.</u>
Describe in Par	riteria used to a	trie selection criteria used to award trie grants or assistance. Describe in Part IV the organization's procedures for monitori	or assistance; es for monitoring t	the selection criteria used to award the grants of assistance?  Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	unds in the United				2
<b>E</b>	and Other As	sistance to Go	vernments and	<b>Organizations</b> i	n the United St	tates. Complete if	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990,	nswered "Yes" to	Form 990,
	ine 21, for an	y recipient that	received more th	ıan \$5,000. Part	Il can be duplica	Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	space is needed.		
1 (a) Name and address of organization or government	of organization ant	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	of grant ance
(1) See Attached Sheet	ət								
(2)									
(3)									
(4)									
(5)									!
(9)									
ω									
(8)									
(6)									
(10)									:
(11)									
(12)									:
2 Enter total num 3 Enter total num	ber of section	Enter total number of section 501(c)(3) and government Enter total number of other organizations listed in the lin	Enter total number of section 501(c)(3) and government organizat Enter total number of other organizations listed in the line 1 table	organizations listed in the line 1 table in 1 table	ne 1 table			<b>A A</b>	
Pap	on Act Notice, s	see the Instruction	s for Form 990.		Ü	Cat. No. 50055P		Schedule I (F	Schedule I (Form 990) (2013)

Schedule I (Form 990) (2013)

Schedule I (Form 990) (2013) (f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance (c) Amount of cash grant Part III can be duplicated if additional space is needed. (b) Number of recipients (a) Type of grant or assistance Part IV Part III Ŋ 9 8 က 4

# **SCHEDULE N**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Liquidation, Termination, Dissolution, or Significant Disposition of Assets

► Complete if the organization answered "Yes" to Form 990, Part IV, lines 31 or 32; or Form 990-EZ, line 36.

► Attach certified copies of any articles of dissolution, resolutions, or plans.

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Employer Identification number

94-3372036	90, Part IV, line 31, or Form 990-EZ, line 36.	(f) Name and address of recipient recipient(s) (if recipient(s) (if tax-exempt) or type of entity						
94-3372036	swered "Yes" to Form (	(e) EiN of recipient (t						
	<b>Dissolution.</b> Complete this part if the organization an tional space is needed.	(d) Method of determining FMV for asset(s) distributed or transaction expenses						
		(c) Fair market value of asset(s) distributed or amount of transaction expenses						
		(b) Date of distribution						
ck. Herrington & Sutcliffe Foundation.	Part I Liquidation, Termination, or Dissolution. Complete Part I can be duplicated if additional space is needed.	(a) Description of assat(s) distributed or transaction expenses paid						
The Orrig	Part i	-						

yee of the organization:	
or key employee of the	
trustee, or key	
officer, director,	
Did or will any o	
ă	

- Become a director or trustee of a successor or transferee organization? . . . Œ
- Become an employee of, or independent contractor for, a successor or transferee organization? Φ
- Become a direct or indirect owner of a successor or transferee organization? ပ
- Receive, or become entitled to, compensation or other similar payments as a result of the organization's liquidation, termination, or dissolution? If the organization answered "Yes" to any of the questions in this line, provide the name of the person involved and explain in Part III. 🏲 σ

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Yes

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assets in accordance with its governing instrument(s)? If "No." describe in Part III.  assets in accordance with its governing instrument(s)? If "No." describe in Part III.  by all of its is buttler in accordance with state laws?  severning bonds outstanding during the year?  form, or Other Transfer of More Than 25% of the Organization's Assets. Complete this part if the organization at full can be duplicated if additional space is needed.  form, or Other Transfer of More Than 25% of the Organization's Assets. Complete this part if the organization at full can be duplicated if additional space is needed.  form, or Other Transfer of More Than 25% of the Organization's Assets. Complete this part if the organization at full can be duplicated if additional space is needed.  form, or other Transfer of More Than 25% of the Organization's Assets. Complete this part if the organization are considered and state in the organization.  form or other Transfer of More Than 25% of the Organization's Assets. Complete this part if the organization are considered and state in the organization.  form or other transfer or otherwise and the organization's significant disposition of assets?  assets or transferse organization?  for any of the questions in this line, provide the name of the person involved and explainin Part III.  assets or the organization?  for any of the questions in this line, provide the name of the person involved and explainin part III.  assets or the organization or the organization?  for any of the questions in this line, provide the name of the person involved and explaining and the provide the provide the name of the person involved and explaining and the provide the provide the provide the provide the provided provided and explaining and provided and explaining and provided and explaining and provided and explaining and provided and explaining and provided and explaining and provided and explaining and provided and explaining and provided and explaining and provided and explaining and provided and explaini	Schedule N (Form 990 or 990-EZ) (2013)  Part Liquidation, Termination, or Dissolution (CO	or Dissolution		wear then Form 990	Part X column (R)	line 16 (Total assets) and line	Pa	01
organization required to notify the attorney general or other appropriate state official of its intent to dissolve, injuridate, or ferminate?  44  Gardiachor required to notify the attorney general or other appropriate state official of its intent to dissolve, injuridate, or ferminate?  45  Gardiachor required to notify the attorney general or other appropriate state official of its intent to dissolve, injuridate, or ferminate?  45  Gardiachor state is well of its labilities of the gardiachor with state is well of its labilities of the gardiachor with state is well of the control of organization of the search of the control of t	<b>Note.</b> If the organization distribute (Total liabilities), should equal -0	ed all of its as		year, tnen Form 990.	ran A, column (b)	, iine to (total assets), and iine	Yes	6
description to motify the authoring general or other appropriate state official of its intent to dissolve, iquidate, or terminate?  'did the organization provide such notice?  'did the organization provide such notice?  'did the organization provide such notice?  'did the organization brown any tax-evering the profit of the organization than 15 organization to the organization and setting or detection of state is bettered to the organization than 15 organization than 15 organization and setting or detection of setting than 15 organization and setting organization and setting organization and setting organization and setting organization and setting organization and setting organization and setting organization and setting organization and setting organization and setting organization and setting organization and setting setting organization and setting organization and setting organization and setting organization and setting organization and setting setting organization and setting organization and setting setting setting organization and setting setting setting organization and setting setti	e organization distribute its as	ssets in accordar	ice with its governing	instrument(s)? If "No,	" describe in Part III .		e .	- 1
day organization discharge or pay all of its liabilities in accordance with state laws?  Organization discharge or pay all of its liabilities in accordance with state laws?  Organization discharge or defease all of its liabilities where the laws?  To line bb, describe in Part III how the organization deleased of the two-seventy bond labilities with the infernal Reventor Code and state laws?  Organization discharge or defease all of its twe-seventy bond labilities and the laws?  To line bb, describe in Part III how the organization deleased or otherwise settled these labilities. If *No.' explain in Part III how the organization deleased or otherwise settled these labilities. If *No.' explain in Part III how the organization deleased or otherwise settled the organization or described in Part III how the organization deleased or otherwise settled in accordance with the infernal Revente Code and state laws?  Set Charges District VI, Inte 30; Part II can be duplicated if additional space is needed.  All any officer, director, tustiee, or key employee or the organization:  Interpretation or transferee organization?  An a director or trusties or a successor or transferee organization?  An an employee of or independent contractor for, a successor or transferee organization?  An an employee of or independent contractor for, a successor or transferee organization?  Organization and the person invoked and explain in Part III.  An an employee of the organization or other statement of the person invoked and explain in Part III.	organization required to notify	y the attorney ge	neral or other appropi	riate state official of its	intent to dissolve, lic	uidate, or terminate?	<b>4</b> a	ŀ
progratization discharge or pay all ris is buttered in accordance with the Infernal Revenue Code and state laws?  The ine bit describes in Part II then the organization of the Organization are condence with the Infernal Revenue Code and state laws?  Better the companies of the Organization of the Organization in Part III.  Better controlled in Part II then the organization and the companies of the Organization and the companies of the Organization and the companies of the Organization and the companies of the Organization and the companies of the Organization and the companies of the Organization and the companies of the Organization and the companies of the Organization and the companies of the Organization and the companies of the Organization and the companies of the Organization and the companies of the Organization and the companies of the Organization and the companies of the Organization and the companies of the Organization and the companies of the Organization and the companies of the Organization and the companies of the Organization and the Companies of the Organization of Organization of Organization of Organization of Organization of Organization of Organization of Organization of Organization of Organization of Organization of Organization of Organization of Organization of Organization of Organization of Organ	," did the organization provid	le such notice?					49	-
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Organization dischage or defease all of its kn-exempt broth labilities full meets that he internal prevented Code and state laws?  10 line 6b, describe in Part III how the organization defeased or Orbenvies settled these labilities if "No" explain in Part III how the organization answered ses "to chrom 990," part IV, line 52, or Form 990-52. In 55, Part II can be displacated if additional space is needed.  10 line and province or mandation or other Transfer of More Than 25% of the Organization's Assets. Complete this part if the organization answered describing the form 990-52. In 10 line 10 line and inches the organization of the organization of the organization of the organization organization sequences and movement of a successor or transfere organization.  10 line 25, deciding the organization or organization or organization organizat	organization have any tax-ex	xempt bonds ou	tstanding during the y	/ear?			•	- 1
To line Bb. Cacharge, Disposition, or Other Transfer of More Than 25% of the Organization answered complete this part if the organization answered set to from 990-EZ, line 36. Part II can be duplicated if additional space is needed.  Secretary of the Cacharge Disposition, or Other Transfer of More Than 25% of the Organization's Assets. Complete this part if the organization answered set to Form 990-EZ, line 36. Part II can be duplicated if additional space is needed.  Secretary of the Cacharge Disposition of the Organization answered set to the Organization answered set to the Organization answered set to the Organization answered set to the Organization answered set to the Organization answered set to the Organization answered set to the Organization answered set to the Organization answered set to any officer, director, trustee of a successor or transferee organization?  Secretary of the Organization:  Secretary of the Organization answered set to the Organization answered set or indiced towner of a successor or transferee organization?  Secretary of the Organization answered set to any of the Organization answered vest to any of the Questions in the line provide the name of the Organization answered vest to any of the Questions in the line provide the name of the Organization answered vest to any of the Questions are set to the Organization answered vest to any of the Questions in the Inspire of the Organization answered vest to any of the Question answered vest to any of the Questions are set to the Organization answered vest to any of the Questions are set to the Organization answered vest to any of the Questions are set to the Organization answered vest to any of the Question and Depth and Explain in Part III.	organization discharge or def	fease all of its tax	exempt bond liabilities	s during the tax year in	accordance with the I	nternal Revenue Code and state lav		- 1
Exchange, Disposition, or Other Thraster of More Than 25% of the Organization spaces. Complete this part if the organization answered destroyment of the measured definition of page of the organization appears and definition of the service of the organization appears and definition of the service of the organization appears and definition of the service of the organization appears and definition of the service of the organization appears and definition of the service of the organization appears and definition of the service of the organization appears and definition of the service of the organization.  In any officer, director, trustee, or key employee of the organization:  In any officer, director, trustee, or key employee of the organization:  In any officer, director, trustee, or key employee of the organization?  In any officer, director, trustee, or key employee of the organization?  In any officer, director, trustee, or key employee of the organization?  In any officer, director, trustee, or key employee of the organization?  In any officer, director, trustee, or very employee of the organization?  In any officer, director, trustee, or very employee organization?  In any officer, director, trustee, or very employee organization?  In any officer, director, trustee, or very employee organization?  In any officer, director, trustee, or very employee organization?  In any officer, director, trustee, or very employee organization?  In any officer, director, trustee, or very employee organization?  In any officer, director, trustee, or organization and expanding the person involved and expanding the pare in the person involved and expanding the person involved and expanding the person involved and expanding the person involved and expanding the person involved and expanding the person involved and expanding the person involved and expanding the person involved and expanding the person involved and expanding the person involved and expanding the person involved and expanding the person involved and expanding the	" to line 6b, describe in Part I	III how the organ	zation defeased or of	herwise settled these	labilities. If "No," exp	lain in Part III.		1.
(e) Elly of recopent describation assettig) destructed on assettig) destructed on assettig) destructed on assettig) destructed or or than state or assettig) destructed or or than state or assettig) destructed or or or other similar payments as a resolut of the organization?	i <b>ale, Exchange, Dispositi</b> d Yes" to Form 990, Part IV,	on, or Other T line 32, or Forr	r <b>ansfer of More Th</b> n 990-EZ, line 36. F	ian 25% of the Org Part II can be duplica	anization's Assets ated if additional sp	. Complete this part if the orga ace is needed.	anization answered	_
director, trustee, or key employee of the organization:  Include of a successor or transferee organization?  Include of a successor or transferee organization?  Include to write of a successor or transferee organization?  Include to write of a successor or transferee organization?  Include to write organization organization?  Included to write organization organization?  Included to write organization organization?  Included to write organization organization?  Included to write organization organization?  Included to write organization organization?  Included to write organization o	(a) Description of asset(s) distributed or transaction expenses paid	(b) Date of distribution	(c) Fair market value of asset(s) distributed or amount of transaction expenses	(d) Method of determining FMV for asset(s) distributed or transaction expenses	(e) EIN of recipient	(f) Name and address of recipient	(g) IRC section of recipient(s) (if tax-exempt) or type of entity	
director, trustee, or key employee of the organization:  trustee of a successor or transferee organization?  direct owner of a successor or transferee organization?  direct owner of a successor or transferee organization?  sinect owner of a successor or transferee organization or organization or organization in the organization or assets?  sinect owner or any of the questions in this line, provide the name of the person involved and explain in Part III	for Schedule 1							
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20 20 20 30	will any officer, director, trust	ee, or key emplo	yee of the organization	:uc			Yes	
20 20	e a director or trustee of a su e an employee of, or indepen	uccessor or trans ndent contractor	teree organization? for, a successor or tra	ansferee organization				
qanization answered "Yes" to any of the questions in this line, provide the name of the person involved and explain in Part III	a direct or indirect owner or, or become entitled to, com	of a successor or	transferee organizatıd ıer sımılar payments a	on? as a result of the organ	ization's significant d	isposition of assets?		1 1
	ganization answered "Yes" t	to any of the que	stions in this line, pro	vide the name of the p	erson involved and e	xplain in Part III		1

Part III	Page Supplemental Information. Provide the information required by Part I, lines 2e and 6c, and Part II, line 2e.
raitiii	Also complete this part to provide any additional information
	Also complete this part to provide any additional information.
	•••••••••••••••••••••••••••••••••••••••
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### 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.

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Employer identification number

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

Open to Public Inspection

The Orrick, Herrington & Sutcliffe Foundation	94-3372036			
Part VI, Section A, Question 2: All of the directors and officers are partners or employees of Orrick, Herrington & Sutcliffe LLP, the law firm				
partnership that founded the organization.				
Part VI, Section B, Question 11a and 11b: Once Form 990 was completed and reviewed by the tax dep	artment team it was sent to the			
organizations governing body. The governing body has agreed that Form 990 has been completed wi	th sufficient and accurate information.			
It was then returned to the tax department and filed accordingly.				
Part VI, Section C, Question 19: The organization does not make its governing documents, conflicts or	f interest policy, and financial			
statements available to the public.				
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chedule O (Form 990 or 990-EZ) (2013) larne of the organization	Pa
iame or the organization	Employer Identification number
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### The Orrick, Herrington, & Sutcliffe Foundation – 94-3372036 Calendar Year 2013 – Form 990 Statement of Primary Purpose

The Orrick, Herrington, & Sutcliffe Foundation was formed to administer a broad range of charitable and educational programs for individuals, non-profit organizations, governmental entities and/or the general public. It is anticipated that these programs will be conducted primarily within the communities where Orrick, Herrington, & Sutcliffe LLP maintains offices. In addition to furthering these charitable purposes, the Foundation was established for the purpose of consolidating the charitable giving of Orrick's partners and employees. The consolidation of these charitable giving activities into a single foundation is intended both to encourage the making of further charitable gifts by these individuals and to allow the recipients of such grants to recognize the aggregate gifts received from all partners and employees at Orrick.

### The Orrick, Herrington, and Sutcliffe Foundation - 94-3372036 Calendar Year 2013 - Form 990 List of Officers, Directors, Trustees, and Key Employees

### **Board of Directors**

Mitch Zuklie- Director 1000 Marsh Road Menlo Park, CA 94025

Alan G. Benjamin - Director 777 South Figueroa Street Suite 3200 Los Angeles, CA 90017

J. Peter Coll - Director 51 West 52nd Street New York, NY 10019

Carl F. Lyon - Director 51 West 52nd Street New York, NY 10019

Mike Torpey - Director 405 Howard Street San Francisco, CA 94105

Larry Low - Director 405 Howard Street San Francisco, CA 94105

Officers

Mitch Zuklie - CEO 1000 Marsh Road Menlo Park, CA 94025

Linda Havard - CFO 405 Howard Street San Francisco, CA 94105

Larry Low - Secretary 405 Howard Street San Francisco, CA 94105

### The Orrick, Herrington & Sutcliffe Foundation - 94-3372036 Calendar Year 2013 - Schedule I Form 990 Statement of Program Service Accomplishments

ACLU Foundation of Maryland	5000
Action Against Hunger	26900
Aim High	7500
Appleseed	30000
Asian American Legal Defense & Education	10000
Asian Americans Advancing Justice - LA	2000
Bay Area Legal Aid	40000
California Lawyers for the Arts	5000
Center for Gender & Refugee Studies	2500
Center for Reproductive Rights	10000
Children's Law Center	5000
City Bar Justice Center	35000
Community Foundation for the Ohio Valley	4000
Community Rights Foundation	5000
DC Bar Pro Bono Program	10000
Education Alliance	5000
Embaracadero YMCA	60000
Friends of the Children King County	5000
Hands on DC	2500
HER Justice	15000
Immigrant Legal Resource Center	15000
International Rescue Committee	18935
Iraqi Refugee Assistance Project	5000

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Justice and Diversit	y Center	48000
Law Foundation of	Silicon Valley	50000
Lawyers' Committe	e for Cıvil Rights	40000
Lawyers Alliance fo	r New York	35000
Legal Aid of DC	•	7500
Legal Aid of New Yo	ork	85025
Legal Aid Society of	San Mateo County	25000
Legal Aid Society SI	F-Emp Law Center	32000
Legal Counsel for t	ne Elderly	3500
Legal Outreach		14000
Los Angeles County	Bar Foundation	25000
Mercy Corps		1000
Mitchell Kapor Fou	ndation	5000
Mural Music & Arts	s Project	5000
N Wheeling Comm	unity Youthbuild Center	3000
NAACP Legal Defer	se and Educational Fund	5000
National Immigrati	ons Law Center	15000
National Septembe	er 11 Memorial & Museum	19583
National Veterans	legal Services Program	5000
New York County L	awyers Association	3000
New York Lawyers	for The Public Interest	15000
New York Legal Ass	sistance Group	50000
Northern California	Innocence Project	10000
Oak Ridge Element	ary School	19800

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. Oakland Schools Foundation	10000
One Justice	2500
Pro Bono Institute	5000
Pro Bono Net, Inc.	2500
Pro Bono Partnership, Inc.	5000
Public International Law & Policy Group	18000
Public Law Center	5000
Sacramento Theatre Company	5000
Storefront Academy Harlem	45000
Swords to Plowshares	2500
Tahirih Justice Center	5000
U.VA. Law School Foundation	50000
UNICEF	21040
Volunteer Legal Service Program	5000
Volunteer of Legal Service, Inc.	10000
Women's Refugee Commission	5000
Youth Rights and Justice	2500
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