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EXTENDED TO NOVEMBER 16, 2015 Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

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

OMB No 1545-0052

| For | calen | dar year 2014 or tax year beginning | · · · · · · · · · · · · · · · · · · · | , and ending | | Topon to Labric Moposition |
|---|--------------|--|---|---|---|--|
| Nar | ne of | foundation | | | A Employer identificati | on number |
| | | SAMUELI FOUNDATION | | Т | 33-075823 | 7 |
| | | nd street (or PO box number if mail is not delivered to street $1 \;\; E_{ullet} \;\; COAST \;\; HIGHWAY$ | address) | Room/su | B Telephone number 949-760-4 | 300 |
| | | own, state or province, country, and ZIP or foreign pONA DEL MAR, CA 92625 | ostal code | | C If exemption application is | s pending, check here |
| | | all that apply Initial return | Initial return of a fo | rmer public charity | D 1. Foreign organizatio | ns, check here |
| | | Final return Address change | Amended return Name change | | 2. Foreign organizations in check here and attach | meeting the 85% test, computation |
| H C | _ | type of organization X Section 501(c)(3) exction 4947(a)(1) nonexempt charitable trust | empt private foundation Other taxable private founda | tion | E If private foundation s under section 507(b)(| |
| l Fa | | rket value of all assets at end of year J Accounting | ng method X Cash | Accrual | F If the foundation is in | ••• |
| | rom I •\$ | Part II, col. (c), line 16) Ut 225, 252. (Part I, colu. | her (specify) mn (d) must be on cash b | oasis) | under section 507(b)(| 1)(B), check here |
| | ert I | | (a) Revenue and expenses per books | (b) Net investment | t (c) Adjusted net income | (d) Disbursements for chantable purposes (cash basis only) |
| | 1 | Contributions, gifts, grants, etc , received | 1,058,230. | | N/A | |
| | 3 | Check If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments | 63. | 6 | 3. | STATEMENT 2 |
| | 4 | Dividends and interest from securities | | | | |
| Revenue | 1 . | Gross rents Net rental income or (loss) | | | | |
| | | Net gain or (loss) from sale of assets not on line 10 | 1,147. | | | STATEMENT 1 |
| | b | Gross sales pnce for all assets on line 6a 309,377. | | 272 55 | | |
| | 7 | , , , | | 278,55 | 4. | |
| | 8 g | Net short-term capital gain Income modifications | | ••••••••••••••••••••••••••••••••••••••• | ········ | |
| | 10a | Gross sales less returns | | | | |
| | b | Less Cost of charge sould be the sould be th | | ••••••••••• | | |
| | C | Gross profit or (loss) = 2015 / | <u>p</u> \ | | | |
| | 11 | 1701 414 | 1 050 440 | 270 61 | 7 | |
| _ | 12 | Total. Add lines Rithrough 11 Compensation of officers queetors risked by | 74,879. | 278,61 | 0. | 59,903. |
| | 14 | Other employee salaries and wages | 148,163. | | 0. | 118,530. |
| | 15 | Pension plans, employee benefits | 19,102. | | 0. | 15,282. |
| ses | 16a | Legal fees | | | | |
| beu | I | Accounting fees STMT 3 | 19,631. | 4,90 | | 7,852. |
| S こばいいでした and Administrative Expense | | Other professional fees STMT 4 | 20,445. | 4,94 | 5. | 8,300. |
| いまいいめつぶ d Administrative | 17 18 | Interest Taxes STMT 5 | 28,730. | | 0. | 15,620. |
| √o istra | 19 | Taxes STMT 5 Depreciation and depletion | 6,862. | | 0. | 13,020. |
| 돌檀 | 20 | Occupancy - | 7,000 | · · · · · · · · · · · · · · · · · · · | | |
| ηē | 21 | Travel, conferences, and meetings | 79,352. | | 0. | 67,451. |
| and | 22 | Printing and publications | | | | |
| D | 23 | Other expenses STMT 6 | 30,540. | | 0. | 16,812. |
| 8 % dゴS Operating and | 24 | Total operating and administrative | 427,704. | 9,85 | 3 | 309,750. |
| ∾ ဝိ | 25 | expenses. Add lines 13 through 23 Contributions, gifts, grants paid | 586,440. | | | 586,440. |
| ა ეეგ | 26 | Total expenses and disbursements. | 333/1103 | | | 3007_1100 |
| ກ້ | | Add lines 24 and 25 | 1,014,144. | 9,85 | 3. | 896,190. |
| | 27 | Subtract line 26 from line 12 | | | | |
| | 1 | Excess of revenue over expenses and disbursements | 45,296. | 0.50 = 5 | _ | |
| | I | Net investment income (if negative, enter -0-) | | 268,76 | N/A | |
| 4235 11-2 | | Adjusted net income (if negative, enter -0-) LHA For Paperwork Reduction Act Notice, see | Instructions | | N/A | Form 990-PF (2014) |
| 11-2 | 4-14 | LID TO Tapermois reduction set worde, 500 | manuonuna. | 4 | | 101111 330-FT (2014) U |

Part III Analysis of Changes in Net Assets or Fund Balances

| 1 | Total net assets or fund balances at beginning of year - Part II, column (a), line 30 | | | |
|---|---|---|--------|-----|
| | (must agree with end-of-year figure reported on prior year's return) | 1 | 179,95 | 6. |
| 2 | Enter amount from Part I, line 27a | 2 | 45,29 | 6 . |
| 3 | Other increases not included in line 2 (itemize) | 3 | | 0. |
| 4 | Add lines 1, 2, and 3 | 4 | 225,25 | 2 . |
| 5 | Decreases not included in line 2 (itemize) | 5 | (| 0. |
| 6 | Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 | 6 | 225,25 | 2 . |

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30 Total net assets or fund balances

31 Total liabilities and net assets/fund balances

179,956.

179,956.

225,252

225,252

| (a) List and desc | ribe the kind(s) of property sold (e.g. trehouse, or common stock, 200 sh | , real estate, | Lincome | (b) Ho | w acquired Purchase | | acquired day, yr) | (d) Date sold (mo , day, yr) |
|--|--|--|--------------------------------------|-----------------|------------------------|-------------|------------------------------|--|
| | EWORK INC | S IVILO CO) | | D- | Donation | | | |
| - | EWORK INC | | | | D | 11/1 | 6/12 | 10/15/14 |
| <u>b</u> | | | | | | | | - |
| d | · · · · · · · · · · · · · · · · · · · | | | | | | | |
| 8 | - | | | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | | st or other basis expense of sale | | | | Gain or (loss s (f) minus | |
| a 309,377. | | _ | 30,82 | 3. | | | | 278,554. |
| b | | | | | | | | |
| C | | | | | | | | |
| d | | | | | | | | |
| е | | <u>l</u> | | | | | | |
| Complete only for assets showin | ig gain in column (h) and owned by | ı | | | (| I) Gains (C | Col (h) gain | minus |
| (i) F M V as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | | cess of col (i) col (j), if any | | co | Losses | not less tha (from col | (h)) |
| <u>a</u> | | | | | • | | | 278,554. |
| b | · | | | | | | | |
| C | · · · · · · · · · · · · · · · · · · · | | | | | | | |
| d | | | | | | | | |
| <u>e</u> | | | | | | | | |
| 2 Capital gain net income or (net ca | pital loss) { If gain, also enterpital loss) | r in Part I, line - in Part I, line | 7 7 | } | 2 | | | 278,554. |
| 3 Net short-term capital gain or (los if gain, also enter in Part I, line 8, | , | nd (6) | | | | | | |
| If (loss), enter -0- in Part I, line 8 | | | | <u> </u> | 3 | | N/A | <u>. </u> |
| Part V Qualification U | nder Section 4940(e) for | Reduced | l Tax on Net | Inve | stment In | ome | | |
| (For optional use by domestic private | foundations subject to the section | 4940(a) tax on | net investment in | come) | | | • | - |
| If section 4940(d)(2) applies, leave th | nis nart hlank | | | | | | | |
| | · | | | | | | | |
| Was the foundation liable for the sect | | | • | iod? | | | | Yes X No |
| If "Yes," the foundation does not qual Enter the appropriate amount in 6 | ify under section 4940(e). Do not co | mplete this pa | irt fana malusa assura | | | | | |
| (a) | each column for each year, see the ii | iistructions be | Tore making any e | | | <u></u> | | (4) |
| Base period years Calendar year (or tax year beginnii | (b) Adjusted qualifying dis | tributions | Net value of no | (c) ncharita | ible-use assets | | Distrit | (d) oution ratio vided by col (c)) |
| 2013 | 19 111/ 1 | 0,881. | | | 217,072 | | (cor (b) an | 6.361396 |
| 2012 | 1,10 | 8,871. | | | 396,697 | | | 2.795259 |
| 2011 | | 4,858. | | | 335,610 | | | 2.934531 |
| 2010 | | 3,482. | | | 392,735 | 5. | | 3.649998 |
| 2009 | | 0,894. | | | 410,817 | · • | | 4.359347 |
| | | | | | J | | | <u>-</u> <u>-</u> - |
| 2 Total of line 1, column (d) | | | | | | 2 | | 20.100531 |
| 3 Average distribution ratio for the 5 | 5-year base period - divide the total (| on line 2 by 5, | or by the number | of year | S | | | |
| the foundation has been in exister | | • | • | • | | 3 | | 4.020106 |
| | | | | | | | | |
| 4 Enter the net value of noncharitab | le-use assets for 2014 from Part X, | line 5 | | | | 4 | | 269,260. |
| | | | | | | | | |
| 5 Multiply line 4 by line 3 | | | | | | 5 | | 1,082,454. |
| | | | | | | | | |
| 6 Enter 1% of net investment incom | ne (1% of Part I, line 27b) | | | | | 6 | | 2,688. |
| | | | | | | | | |
| 7 Add lines 5 and 6 | | | | | | 7_ | | 1,085,142. |
| _ | | | | | | | | 006 555 |
| 8 Enter qualifying distributions from | • | | | | | 8_ | L | 896,190. |
| | line 7, check the box in Part VI, line | 1b, and comp | lete that part using | g a 1% | tax rate | | | |
| See the Part VI instructions | | | - | | | | | |
| 423521 11-24-14 | | | | | | | I | Form 990-PF (2014) |

423531

| Part VIII Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued) | ion Managers, Hig | jhly | |
|--|-------------------|-------------|------------------|
| 3 Five highest-paid independent contractors for professional services. If none, enter | 'NONE." | | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of | service | (c) Compensation |
| H&S VENTURES - 2101 E.COAST HIGHWAY, SUITE | PROFESSIONA | <u>L</u> | |
| 300, CORONA DEL MAR, CA 92652-19 | MANAGEMENT | SERVICES | 96,550. |
| | | | |
| Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities | | > | 0 |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produced in N/A. | | | Expenses |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on line. | nes 1 and 2 | | Amount |
| 1 N/A | | | |
| 2 | | | |
| All other program-related investments. See instructions. | | | |
| Total. Add lines 1 through 3 | | • | 0. |

| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes | | |
|----|---|----------------|--------------------|
| а | Average monthly fair market value of securities | 1a | _ 0. |
| b | Average of monthly cash balances | 1b | 264,978. |
| C | Fair market value of all other assets | 10 | 8,382. 273,360. |
| d | Total (add lines 1a, b, and c) | 1d | 273,360. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) 1e 0 • | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 273,360. |
| 1 | Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 4,100. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. | 5 | 269,260. |
| 6 | Minimum Investment return. Enter 5% of line 5 | 6 | 13,463. |
| P | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here in and do not complete this part) | id certain | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 13,463. |
| 2a | Tax on investment income for 2014 from Part VI, line 5 2a 5, 375. | | |
| b | Income tax for 2014 (This does not include the tax from Part VI) 2b | | |
| C | Add lines 2a and 2b | 2c | 5,375. |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 5,375. 8,088. |
| 1 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 8,088. |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0. |
| 7 | Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 8,088. |
| | Qualifying Distributions (see Instructions) | | |
| ١ | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes | | 906 100 |
| | Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 | 1a | 896,190. 0. |
| b | Program-related investments - total from Part IX-B | 1b | <u> </u> |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the | | |
| a | Suitability test (prior IRS approval required) | 3a | |
| .b | Cash distribution test (attach the required schedule) | 3b | 896,190. |
| 1 | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 090,190. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | _ | ^ |
| | Income Enter 1% of Part I, line 27b | 5 | 896,190. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years | quaimes for tr | e section |

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2013 | (c) 2013 | (d) 2014 |
|--|---------------|----------------------------|---|---|
| 1 Distributable amount for 2014 from Part XI, line 7 | | | | 8,088. |
| 2 Undistributed income, if any, as of the end of 2014 | | | | |
| a Enter amount for 2013 only | | | 0. | |
| ђ Total for prior years | | 0. | | ~ |
| 3 Excess distributions carryover, rf any, to 2014 | | <u> </u> | | |
| a From 2009 1,790,894. | | | | |
| b From 2010 1,427,815. | | | | |
| c From 2011 969,031. | | | | |
| d From 2012 1, 104, 640. | | | | |
| e From 2013 1,388,059. | | | | |
| f Total of lines 3a through e | 6,680,439. | | | |
| 4 Qualifying distributions for 2014 from | | | ", | |
| Part XII, line 4 \triangleright \$ 896, 190. | | | | |
| a Applied to 2013, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior | | | | |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | 0. | | | |
| d Applied to 2014 distributable amount | | | | 8,088. |
| e Remaining amount distributed out of corpus | 888,102. | | | |
| 5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a)) | 0. | | | 0. |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 7,568,541. | | | |
| b Prior years' undistributed income Subtract | | | · | |
| line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' undistributed income for which a notice of | | | | , |
| deficiency has been issued, or on which | | | | |
| the section 4942(a) tax has been previously assessed | | 0. | | |
| d Subtract line 6c from line 6b Taxable | | | | |
| amount - see instructions | | 0. | | |
| e Undistributed income for 2013 Subtract line | | | | ·* *********************************** |
| 4a from line 2a Taxable amount - see instr | | | 0. | |
| f Undistributed income for 2014 Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2015 | | | | 0. |
| 7 Amounts treated as distributions out of | | | | |
| corpus to satisfy requirements imposed by | | | | |
| section 170(b)(1)(F) or 4942(g)(3) (Election | | | | |
| may be required - see instructions) | 1,058,230. | | | |
| 8 Excess distributions carryover from 2009 | | | | |
| not applied on line 5 or line 7 | 732,664. | | *************************************** | |
| 9 Excess distributions carryover to 2015 | | | | |
| Subtract lines 7 and 8 from line 6a | 5,777,647. | | | |
| 10 Analysis of line 9 | | | | |
| a Excess from 2010 1,427,815. | | | | |
| b Excess from 2011 969, 031. | | | | |
| c Excess from 2012 1,104,640. | | | | |
| d Excess from 2013 1,388,059. e Excess from 2014 888,102. | | | | |
| e Excess from 2014 888, 102. | 1 | | | Sorm 000 DE (0011) |
| 11-24-14 | | | | Form 990-PF (2014) |

THE SAMUELI FOUNDATION

33-0758237

423611 11-24-14

| Program service revenue a | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | (e) Related or exempt function income |
|--|-------------------------|----------------|--|---------------------------|---------------------------------------|
| a | code | Amount | code | Amount | Tunction income |
| b c d e f Sees and contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities | | | | | |
| c d e f g Fees and contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities | | | | | |
| d e f g Fees and contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities | | | | | |
| f g Fees and contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities | | | | | |
| 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities | | | | | |
| 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities | | | | | |
| 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities | | | | | |
| 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities | | | | | |
| investments Dividends and interest from securities | | | | | |
| 4 Dividends and interest from securities | | | | | |
| | | | 14 | 63. | |
| 5 Net rental income or (loss) from real estate | 1 1 | | | | |
| | | | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal property | | | | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other | | | | | |
| than inventory | | | 18 | 1,147. | |
| 9 Net income or (loss) from special events | | | | | _ |
| O Gross profit or (loss) from sales of inventory | | | | | |
| 1 Other revenue | | - | | | · ···· <u></u> · |
| a | | | | | |
| b | | · | 1 1 | | |
| c | | - | | | |
| d | | | | | |
| e | | | | | _ |
| 2 Subtotal Add columns (b), (d), and (e) | | 0 | • | 1,210. | (|
| 3 Total. Add line 12, columns (b), (d), and (e) | <u> </u> | | | 13 | 4 044 |
| See worksheet in line 13 instructions to verify calculations) | | | | | |
| | | | | · · | |
| Part XVI-B Relationship of Activities t | o the Accom | plishment of l | Exempt Pu | urposes | |
| Line No. Explain below how each activity for which income the foundation's exempt purposes (other than | | | -A contributed | importantly to the accomp | lishment of |

| | the foundation's exempt purposes (other than by providing funds for such purposes) |
|----------|--|
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| Part XVII | 7 | amuell Founda egarding Transfers | | ad Relationships With Nonc | 5823/ haritable | Pag | ge 1 <u>3</u> |
|---------------|---|-------------------------------------|--|---|--------------------|------------|---------------|
| | Exempt Organ | | | | | | |
| | • | | llowing with any other organization | · · · | (1) | <u>res</u> | No |
| | | | ion 527, relating to political organiz | ations? | | | |
| | | ation to a noncharitable exen | npt organization of | | | 1 | 37 |
| (1) Cash | | | | | 1a(1) | - | X |
| (2) Othe | | | | | 1a(2) | | Х |
| b Other trai | | | | | | - 1 | v |
| ` ' | s of assets to a noncharital | | | | 1b(1) | | X |
| | | ncharitable exempt organizat | tion | | 1b(2) | | X |
| | al of facilities, equipment, | or other assets | | | 1b(3) | | X |
| , , | bursement arrangements | | | | 1b(4) | | X |
| | is or loan guarantees | | | | 1b(5) | | X |
| | | mbership or fundraising soli | | | 1b(6) | | X |
| | | iling lists, other assets, or pa | | | 15 | | |
| | | | | lys show the fair market value of the good | | ts, | |
| | | | | in any transaction or sharing arrangemen | it, snow in | | |
| - | | other assets, or services reco | | (4) | | | |
| (a) Line no | (b) Amount involved | | ritable exempt organization | (d) Description of transfers, transactions, | and sharing arrai | ngemer | nts |
| | | N, | /A | | | | |
| | | | | | | | |
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| | | | | | | _ | |
| | - | | o, one or more tax-exempt organiza | tions described | <u>г</u> | T | 1 |
| | | r than section 501(c)(3)) or i | n section 527? | | Yes | LX. |] No |
| h It "Yes," c | omplete the following sche (a) Name of org | | (h) Tune of organization | (c) Description of relati | | _ | |
| | N/A | amzativii | (b) Type of organization | (c) Description of relative | Justiih | | |
| | N/A | | - | | | | |
| | | | - | | | | |
| | - · · | | | | | | |
| | | | | | | | |
| Unde | r penalties of penury. I declare | that have examined this return i | ncluding accompanying schedules and st | atements, and to the best of my knowledge | | | |
| and h | | | | tion of which preparer has any knowledge | May the IRS dis | | |
| Sign Here | Manual | VII. | 19/10/1 | DIRECTOR/CFO | shown below (s | see inst | tr)? |
| | nature of officer or trustee | 1 1/ | Date | Title | X Yes | Ц. |] No |
| 0.9 | Print/Type preparer's na | | | Date Check If PT | IN . | | |
| | Time Type property of the | | 1 | self- employed | | | |
| Paid | LAUREN HAV | ERLOCK TH | 10 a letter 18 | | 2005458 | 329 | |
| Preparer | Firm's name > YH | | | | -326931 | | |
| Use Only | | | - | LIIII SEIN P 13 | 520751 | | |
| | | 55 CENTER AVI | ENUE, SUITE 1225 | | | | |
| | Firm's address > 7755 CENTER AVENUE, SUITE 1225 HUNTINGTON BEACH CA 92647 | | | | | | |

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

Department of the Treasury Internal Revenue Service **Schedule of Contributors**

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

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

OMB No 1545-0047

2014

Name of the organization

Employer identification number

| | THE SAMUELI FOUNDATION | 33-0758237 | | | | | | |
|---|--|---------------------------------------|--|--|--|--|--|--|
| Organization type (check one): | | | | | | | | |
| Filers of: | Section: | | | | | | | |
| Form 990 or 990-EZ | 501(c)() (enter number) organization | 501(c)() (enter number) organization | | | | | | |
| | 4947(a)(1) nonexempt charitable trust not treated as a private foundation | | | | | | | |
| | 527 political organization | | | | | | | |
| Form 990-PF | X 501(c)(3) exempt private foundation | | | | | | | |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation | | | | | | | |
| | 501(c)(3) taxable private foundation | | | | | | | |
| Note. Only a section 50 | on is covered by the General Rule or a Special Rule . 1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru | | | | | | | |
| | ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling any one contributor. Complete Parts I and II. See instructions for determining a contributor' | | | | | | | |
| Special Rules | | | | | | | | |
| sections 509(a) any one contrib | ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, outor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amour -EZ, line 1. Complete Parts I and II. | or 16b, and that received from | | | | | | |
| year, total cont | For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. | | | | | | | |
| year, contributi is checked, ent purpose. Do no | For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year | | | | | | | |
| but it must answer "No" | on that is not covered by the General Rule and/or the Special Rules does not file Schedule E on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form | • | | | | | | |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization

Employer identification number

THE SAMUELI FOUNDATION

33-0758237

| Part I | Contributors | (see instructions) | Use duplicate copies of | f Part I if | fadditional space is needed. |
|--------|--------------|--------------------|-------------------------|-------------|------------------------------|
|--------|--------------|--------------------|-------------------------|-------------|------------------------------|

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|-------------|--|----------------------------|---|
| 1 | H&S INVESTMENTS 2101 E. COAST HIGHWAY, SUITE 300 CORONA DEL MAR, CA 92625-1941 | \$ 308,230. | Person Payroll Noncash X (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 2 | H&S INVESTMENTS 2101 E. COAST HIGHWAY, SUITE 300 CORONA DEL MAR, CA 92625-1941 | \$\$ | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 423452 11-0 | J5-14 | \$Schedule B (Form | Person Payroll Noncash (Complete Part II for noncash contributions.) 990, 990-EZ, or 990-PF) (2014) |

Name of organization

Employer identification number

THE SAMUELI FOUNDATION

33-0758237

| Part II | Noncash Property (see instructions). Use duplicate copies of F | _ | -0736237 |
|------------------------------|--|--|---------------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | 6,584 SHRS WAGEWORKS | | |
| 1 | | | |
| | | \$\$ | 12/30/14 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) | | | |
| No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | | |
| 453 11-05 | 14 | \$Sabadula P (Farm 0 | 90, 990-EZ, or 990-PF) (2 |

| Name of organ | nization | | Employer identification number | | | | | | | |
|---------------------------|---|---|---|--|--|--|--|--|--|--|
| THE SAN | MUELI FOUNDATION | | 33-0758237 | | | | | | | |
| Part III | Exclusively religious, charitable, etc., contrib the year from any one contributor. Complete col | utions to organizations described umns (a) through (e) and the follo | In section 501(c)(7), (8), or (10) that total more than \$1,000 for | | | | | | | |
| | completing Part III, enter the total of exclusively religious, of | chantable, etc., contributions of \$1,000 c | or less for the year (Enter this info once) \$ | | | | | | | |
| (a) No. | Use duplicate copies of Part III if additional | | | | | | | | | |
| from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | | | | | | |
| - | - | | | | | | | | | |
| | | | | | | | | | | |
| - | | (e) Transfer of gi | ft | | | | | | | |
| | Transferee's name, address, and | ZIP + 4 | Relationship of transferor to transferee | | | | | | | |
| - | | | | | | | | | | |
| | | | | | | | | | | |
| (a) No. | | | | | | | | | | |
| from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | | | | | | |
| _ | | | | | | | | | | |
| - | | | | | | | | | | |
| | (e) Transfer of gift | | | | | | | | | |
| | Transferee's name, address, and | Relationship of transferor to transferee | | | | | | | | |
| _ | | | | | | | | | | |
| | | | | | | | | | | |
| (a) No. | _ | | | | | | | | | |
| from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | | | | | | |
| _ | | | | | | | | | | |
| - | | | | | | | | | | |
| | (e) Transfer of gift | | | | | | | | | |
| | Transferee's name, address, and | 7IP + 4 | Relationship of transferor to transferee | | | | | | | |
| | Transferoe a traine, address) and | | ricialisms of transfer of to transfer co | | | | | | | |
| _ | | | | | | | | | | |
| (a) No. | | | | | | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | | | | | | |
| - | | | | | | | | | | |
| | | | | | | | | | | |
| | (e) Transfer of gift | | | | | | | | | |
| | Transferee's name, address, and | 7IP + 4 | Relationship of transferor to transferee | | | | | | | |
| | rransieree s name, address, and | | | | | | | | | |
| - | | | | | | | | | | |
| 122454 11 05 14 | | | Schedule R (Form 990, 990,F7, or 990,PF) (2014 | | | | | | | |

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount status of contribution . Name and address (home or business) or substantial contributor recipient BET TZEDEK NONE PC RELIGIOUS ; HOLOCAUST 3250 WILSHIRE BLVD, 13TH FLOOR SURVIVORS LOS ANGELES, CA 90010 25,000. BOYS AND GIRLS CLUB OF AMERICA NONE PC SOCIAL SERVICES 3939 ATLANTIC AVE. SUITE 215 LONG BEACH, CA 90807 10,000. CA DEDICATED TO EDUCATION FOUNDATION NONE PC EDUCATION 11501 DUBLIN BLVD, STE 200 DUBLIN, CA 94568 25,000. CALIFORNIA STEM LEARNING NETWORK NONE PC EDUCATION ; PROGRAM ONE EMBARCADERO CENTER, SUITE 500 SERVICES SAN FRANCISCO, CA 94111 25,000. CYSTIC FIBROSIS FOUNDATION NONE PC HEALTH 2150 TOWNE CENTRE PLACE, STE 120 ANAHEIM, CA 92806 1,000. DISCOVERY SCIENCE CENTER NONE PC EDUCATION 2500 NORTH MAIN STREET SANTA ANA, CA 92705 6,000. ENVISION EXCELLENCE IN STEM NONE PC EDUCATION 2108 LAMBERTON RD CLEVELAND HEIGHTS, OH 44118 20,000. FREEDOM WRITERS NONE PC EDUCATION P.O. BOX 41505 LONG BEACH, CA 90853 5,000. GAMM PHI BETA FOUNDATION NONE PC EDUCATION 12737 E. EUCLID DR. CENTENNIAL, CO 80111 1,000. GIRLS INCORPORATED OF ORANGE COUNTY NONE PC SOCIAL SERVICES 150 PAULINO AVE, SUITE D-290 COSTA MESA, CA 92626 1,000. Total from continuation sheets 524,462. Part XV | Supplementary Information **Grants and Contributions Paid During the Year (Continuation)** If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution · Name and address (home or business) recipient GRANTMAKERS OF EDUCATION NONE PC EDUCATION ; PROGRAM 720 SW WASHINGTON ST SUITE 605 EXPENSES PORTLAND, OR 97205 250. HILLEL FOUNDATION OF ORANGE COUNTY NONE PC RELIGIOUS 4255 CAMPUS DR, STE 250 IRVINE, CA 92612 1,300. HUMAN OPTIONS NONE PC SOCIAL SERVICES P.O. BOX 53745 IRVINE, CA 92619-3745 3,000. ILLUMINATION FOUNDATION NONE PC SOCIAL SERVICES ; 2691 RICHTER AVE, SUITE 107 GENERAL OPERATING IRVINE, CA 92606 EXPENSES 4,000. IRVINE ATHLETIC BOOSTERS CLUB, INC. NONE PC SOCIAL SERVICES ; 4321 WALNUT PROGRAM SERVICES IRVINE, CA 92604 EXPENSES, IRVINE HS 912. ACROSSE JEWISH FEDERATION & FAMILY OF OC NONE PC RELIGIOUS ; GENERAL 1 FEDERATION WAY, SUITE 210 OPERATING EXPENSES IRVINE, CA 92603 62,500. JEWISH THEOLOGICAL SEMINARY NONE PC RELIGIOUS ; EVENT 3080 BROADWAY NEW YORK, NY 10027-4649 2,500. LONG BEACH OPERA NONE PC ART ; GENERAL 507 PACIFIC AVE OPERATING EXPENSES LONG BEACH, CA 90802 7,000. NONE M.I.N.D. PC EDUCATION 15 W. 36TH STREET, 13TH FLOOR NEW YORK, CA 10018 5,000. MACY MUSIC & ARTS NONE PC EDUCATION 24262 SONSPAROW LANE CORONA, CA 92883 1,000. Total from continuation sheets

| 3 Grants and Contributions Paid During the Y | | | | |
|---|--|----------------------|----------------------------------|----------|
| Recipient Name and address (house to be seen a seen a seen and address (house to be seen a seen a seen and address (house to be seen a seen and address (house to be seen a seen a seen and address (house to be seen a seen a seen a seen a seen and address (house to be seen a seen a seen a seen a seen a seen | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | Contribution | |
| | | | | |
| MICHAEL J FOX FOUNDATION | NONE | PC | HEALTH | |
| GRAND CENTRAL STATION P.O. BOX 4777 NEW YORK, NY 10163-4777 | | | | 1,000 |
| | | - | | |
| MUSEUM OF LATIN AMERICAN ART IN LONG | NONE | PC | ART ; GENERAL | |
| 528 ALAMITOS AVE | | | OPERATING EXPENSES | |
| LONG BEACH, CA 90802 | | | | 5,000 |
| | | | | |
| MUSEUM OF SCIENCE BOSTON | NONE | PC | EDUCATION | |
| ONE SCIENCE PARK BOSTON, MA 02114 | | | | F 00/ |
| 50510N, FR 02114 | | | | 5,000 |
| | | | | |
| NATIONAL COLLEGE OF NATURAL MEDICINE 049 SW PORTER STREET | NONE | PC | EDUCATION | |
| PORTLAND, OR 97201 | - | | | 5,000 |
| | | | | |
| OCTANE FOUNDATION OF INNOVATION | NONE | PC | EDUCATION | |
| 65 ENTERPRISE | | | | E 000 |
| ALISO VIEJO, CA 92656 | | | | 5,000 |
| ONEOC | NONE | PC | SOCIAL SERVICES ; | |
| 1901 E FOURTH STREET, SUITE 100 | NONE | | GENERAL OPERATING | |
| SANTA ANA, CA 92705 | | | EXPENSES | 20,000 |
| | | | | |
| DRANGE COUNTY COMMUNITY FOUNDATION | NONE | PC | SOCIAL SERVICES | |
| 4041 MACARTHUR BLVD, STE 510 NEWPORT BEACH, CA 92660 | | | | 10,000 |
| | | | | |
| DRANGE COUNTY HIGH SCHOOL OF THE ARTS | NONE | PC | EDUCATION ; TENNIS | |
| 1010 N. MAIN STREET | | | PROGRAM EXPENSES | |
| SANTA ANA, CA 92701 | | - | | 10,000 |
| DRANGE COUNTY SCIENCE & ENGINEERING | NONE | PC | EDUCATION | |
| FAIR | | | | |
| P.O. BOX 1361 HUNTINGTON BEACH, CA 92647 | | | | 2,500 |
| | | | | <u> </u> |
| ORANGE COUNTY UNITED WAY | NONE | PC | SOCIAL SERVICES | |
| 18012 MITCHELL AVE. SOUTH | | | | |
| Total from continuation sheets | | | | 10,000 |

| \ Document | If recipient to an industrial | | | |
|--|--|--------------------------------|--|--------|
| Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
| | | | | |
| PARTNERSHIP FOR CHILDREN & YOUR 1330 BROADWAY, SUITE 601 DAKLAND, CA 94612 | NONE | PC | EDUCATION | 1,50 |
| PERSONALIZED LIFESTYLE MEDICINE | NONE | PC | HEALTH | 1,30 |
| INSTITUTE 800 FIFTH AVE, STE 4100 | | | | |
| SEATTLE, WA 94612 | | | | 10,000 |
| PHILANTHROPY ROUNDTABLE 1730 M STREET, NW SUITE 601 | NONE | PC | EDUCATION ; GENERAL OPERATING EXPENSES | |
| WASHINGTON, DC 20036 | | | | 1,000 |
| PLANET CARE/GLOBAL HEALTH ACCESS PROGRAM P.O. BOX 1637 | NONE | PC | HEALTH | |
| SEBASTAPOL, CA 95473 | | | | 50,000 |
| QUAN AM BUDDHIST MEDITATION 12670 18TH STREET | NONE | PC | RELIGIOUS ; GENERAL OPERATING EXPENSES | |
| REDLANDS, CA 92373 | | | | 400 |
| SOCIETY FOR SCIENCE & THE PUBLIC 1719 N. STREET NW WASHINGTON. DC 20036 | NONE | PC | EDUCATION ; BROADCOM | 25,000 |
| | | | | 23,00 |
| SOUTHERN CALIFORNIA GRANTMAKERS 1000 NORTH ALAMEDA ST., STE 230 | NONE | PC | EDUCATION | |
| LOS ANGELES, CA 90012 | | | | 5,000 |
| TELLURIDE FOUNDATION 620 MOUNTAIN VILLAGE BLVD., SUITE 2B | NONE | PC | SOCIAL SERVICES ; GENERAL OPERATING | |
| TELLURIDE, CO 81435 | | | EXPENSES | 25,000 |
| TEMPLE BETH SHALOM 2625 NORTH TUSTIN AVE. | NONE | PC | RELIGIOUS | |
| SANTA ANA, CA 92705 | | | | 25,000 |
| THE NATIONAL ACADEMY OF ENGINEERING | none | PC | EDUCATION | |
| WASHINGTON, DC 20001 Total from continuation sheets | | <u> </u> | | 10,00 |

Part XV Supplementary Information **Grants and Contributions Paid During the Year (Continuation)** If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient THORN NONE PC SOCIAL SERVICES 10960 WILSHIRE BLVD STE 1900 LOS ANGELES, CA 90024 5,000. TIGER WOODS LEARNING CENTER NONE PC EDUCATION ONE TIGER WOODS WAY ANAHEIM, CA 92801-5039 10,000. UCI FOUNDATION/SAMUELI CENTER NONE PC HEALTH ; PROGRAM AND 1034 HEWITT HALL EVENT EXPENSES IRVINE, CA 92697-5850 20,400. UCI HILLEL NONE PC RELIGIOUS 574 HILGARD AVE LOS ANGELES, CA 90024 1,000. UCLA FOUNDATION NONE PC EDUCATION ; WOODEN P.O. BOX 24044 ATHLETIC FUND AND LOS ANGELES, CA 90024-0044 PROGRAM EXPENSES 27,200. USC MARSHALL SCHOOL OF BUSINESS NONE PC EDUCATION ATT 29TH FLOOR LOS ANGELES, CA 90089 2,000. VOCATIONAL VISIONS NONE PC SOCIAL SERVICES 26041 PALA MISSION VIEJO, CA 92691 25,000. YMCA OF ORANGE COUNTY NONE PC SOCIAL SERVICES 13821 NEWPORT AVE, STE 200 TUSTIN, CA 92780-7803 1,000. Total from continuation sheets

| FORM 990-PF GAIN OF | (LOSS) FRO | OM SALE | OF ASS | ETS | STA | TEMENT | _1 |
|---|-----------------------------------|---------------------------|--------|---------------------------|------------|-----------------------------|-----|
| (A) DESCRIPTION OF PROPERTY | | | | | TE IRED | DATE SC |)L[|
| 6,584 SHRS WAGEWORK INC | | | | 11/1 | 6/12 | 10/15/ | 14 |
| GROSS VAI | (C) LUE AT 1 OF ACQ. | (D) EXPENSE SALE | | (E) DEPREC. | GAIN | (F) | 3 |
| 309,377. | 308,230. | | 0. | 0. | | 1,14 | 7. |
| CAPITAL GAINS DIVIDENDS FROM | PART IV | | | | | | 0. |
| TOTAL TO FORM 990-PF, PART I, | LINE 6A | | | | | 1,14 | 7. |
| FORM 990-PF INTEREST ON SAVI | INGS AND TEI | MPORARY | CASH I | NVESTMENTS | STA | TEMENT | 2 |
| SOURCE | REVI | A) ENUE BOOKS | | (B) NVESTMENT NCOME | | (C) DJUSTED T INCOME | Ē |
| INTEREST INCOME | | 63. | | 63. | | | |
| | | | | | | | |
| TOTAL TO PART I, LINE 3 | | 63. | | 63. | | | |
| | ACCOUNT | | | 63. | STA | TEMENT | |
| TOTAL TO PART I, LINE 3 FORM 990-PF DESCRIPTION | ACCOUNT: (A) EXPENSES PER BOOKS | ING FEES (B | ;) | (C) ADJUSTE NET INCO | D | TEMENT (D) CHARITAE PURPOSE | |
| FORM 990-PF | (A) EXPENSES | ING FEES (B NET IN MENT I | ivest- | (C) ADJUSTE | D | (D) CHARITAE | BLE |

| • | | | STATEMENT 4 | | |
|---|--|-----------------------------------|-------------------------------|---|--|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | |
| MANAGEMENT FEES CONSULTING FEES INVESTMENT | 12,000. 8,300. 145. | 0. | | 8,300. 0. | |
| TO FORM 990-PF, PG 1, LN 16C | 20,445. | 4,945. | | 8,300. | |
| FORM 990-PF | TAX | ES | S | PATEMENT 5 | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | |
| TAX & LICENSE PAYROLL TAX FEDERAL TAX | 220. 19,500. 9,010. | 0. | | 20. 15,600. 0. | |
| TO FORM 990-PF, PG 1, LN 18 | 28,730. | 0. | | 15,620. | |
| FORM 990-PF | OTHER E | XPENSES | St | гатемент 6 | |
| DESCRIPTION OFFICE OTHER ADMIN TELEPHONE AND INTERNET TRAINING INSURANCE PAYROLL PROCESSING DUES AND SUBSCRIPTIONS | (A) EXPENSES PER BOOKS 925. 765. 8,899. 478. 7,489. 2,724. 9,022. | 0. 0. 0. 0. | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES 0. 612. 4,450. 478. 0. 2,179. 9,022. | |
| RECRUITING GIFTS TO FORM 990-PF, PG 1, LN 23 | 88. 150. 30,540. | 0. | | 71. | |

| DESCRIPTION | COST OR OTHER BASIS | ACCUMULATED DEPRECIATION | BOOK VALUE | FAIR MARKET VALUE | |
|---------------------------|--|--------------------------|--------------|----------------------|--|
| SOFTWARE - WEBSITE | 14,700. | 14,700. | 0. | 0 | |
| SOFTWARE - CRM | 10,800. | 10,800. | 0. | 0 . | |
| SOFTWARE - CRM | 5,400. 5,400. 8,615. 1,265. 1,944. 6,000. | 5,400. | 0. | | |
| SOFTWARE - CRM | | 5,400. | 0. | | |
| SOFTWARE - CRM | | 8,615. | 0. | 0. | |
| LAPTOP | | 1,265. | 0. | | |
| LAPTOP | | • | 0. 1,833. | | |
| SOFTWARE - IOS APP | | | | | |
| COMPUTER (DESKTOP) | 1,546. | 1,030. | 516. | 516 | |
| LAPTOP | 1,109. | 524. | 585. | 585 | |
| COMPUTER (DESKTOP) | 2,371. | 1,119. | | 1,252 | |
| GRANTMAKING WEBSITE | 3,500. | 1,459. | | 2,041 | |
| GRANTMAKING WEBSITE | 3,695. | 1,540. | 2,155. | 2,155 | |
| TO 990-PF, PART II, LN 14 | 66,345. | 57,963. | 8,382. | 8,382 | |
| | | | | | |

NAME OF MANAGER

SUSAN SAMUELI HENRY SAMUELI

| Deprec | lation and A | mortiza | tion De | tall F | ORM 990-PF PAC | GE 1 | | 990-PF |
|--------------------|--|--------------------|---|-------------|---------------------------------------|---|---------------------------------------|---------------------------------------|
| Asset | | | | | Description o | of property | | |
| Number | Date placed in service | Method/ IRC sec | Life or rate | Line No | Cost or other basis | Basis reduction | Accumulated depreciation/amortization | Current year deduction |
| 11 | SOFTWARE | | | | | | | |
| - 17 | 011108 SOFTWARE | | | 16 | 14,700. | | 14,700. | 0. |
| 12 | 011508 | | 3.00 | 16 | 10,800. | | 10,800. | 0. |
| 13 | SOFTWARE | | | <u>}</u> ** | 14/444 | | 1 10/0004 | |
| | 01 15 08 | | | 16 | 5,400. | | 5,400. | 0. |
| 14 | SOFTWARE | | | 19.6 | 1 | | 1 | |
| 15 | 020108 SOFTWARE | | 3.00 | 11.0 | 5,400. | | 5,400. | 0. |
| 13 | 092608 | | | 16 | 8,615. | | 8,615. | 0. |
| 16 | LAPTOP | | | <u></u> | 0,010 | | 3/013. | |
| | 052711 | SL | 3.00 | 16 | 1,265. | | 1,125. | 140. |
| 17 | LAPTOP | 1=- | 10.00 | la .c. | | | | |
| 10 | 01 ₁ 10 ₁ 12 SOFTWARE | | 3.00 | | 1,944. | | 1,296. | 648. |
| 10 | 120112 | | 3.00 | | 6,000. | | 2,167. | 2,000. |
| | COMPUTER | | KTOP) | μŲ | 0,000. | | 21 + 41 + 1 | 2,000. |
| | 010113 | | | 16 | 1,546. | | 515. | 515. |
| 30 | LAPTOP | | 1 | | | | | |
| | 080813 | | | 16 | 1,109. | | 154. | 370. |
| 31 | COMPUTER 0 8,1 2,1 3 | | | 16 | 2,371. | | 329. | 790. |
| 32 | GRANTMAK | | | | 2,3/1. | | 329. | 790. |
| | 093013 | | , | 16 | 3,500. | | 292. | 1,167. |
| 33 | GRANTMAK | | | | | | | |
| | 100313 | | | 16 | 3,695. | | 308. | 1,232. |
| | * TOTAL | 990-F | F PG | 1 1) | 66,345. | 0 | 51,101. | 6,862. |
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| 416261 05-01-14 | | L | <u>L. </u> | # | - Current year section 179 | (D) - Asset dispe | osed | ··- |

ELECTION TO TREAT UNUSED PRIOR YEAR CORPUS DISTRIBUTIONS AS CURRENT YEAR CORPUS DISTRIBUTIONS

The Samueli Foundation (33-0758237)

Tax Year: 2014

Pursuant to Reg. § 53.4942(a)-3(c)(2)(iv), the above referenced Foundation hereby elects to treat, as current distribution out of corpus, the following unused prior tax year's distributions that were treated as corpus distributions under Reg. § 53.4942(a)-3(d)(1)(iii) in such prior tax year:

| Tax Year | Amount |
|----------|--------------|
| 2009 | \$ 1,058,230 |

Signed

Date

Name and Title

STATEMENT/ELECTION TO TREAT PRIVATE FOUNDATION AS A CONDUIT FOUNDATION PURSUANT TO IRC § 170(b)(1)(F)

The Samueli Foundation (33-0758237)

Tax Year: 2014

Pursuant to IRC § 170(b)(1)(F) and Reg. §1.170A-9(h)(2), the above referenced Foundation hereby elects to be treated as a "conduit" foundation for the 2014 tax year. The following are distributions made out of corpus pursuant to IRC §4942(h):

Scholman Divertor

| Tax Year | Amount |
|----------|--------------|
| 2009 | \$ 1,058,230 |

Signed

Date

Name and Title