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Form **990-PF** Department of the Treasury Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

► Do not enter social security numbers on this form as it may be made public.

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

OMB No 1545-0052

For	caler	ıdar year 2014 or tax year beç	ginning	FEE	3 14 ,	2014	, and e	naing	DEC 31, 2014	t
Nar	ne of	foundation							A Employer identification	n number
T	ΗE	MICHELSON FOU	JNDATI	ON					46-4978561	<u> </u>
		nd street (or P O box number if mai			-			Room/suite	B Telephone number	
_2	75	5 CAMPUS DRIVE	E, SUI	TE 2	40				(650) 653-	2406
		own, state or province, country		foreign p	ostal code				C if exemption application is p	pending, check here
_S	AN	MATEO, CA 94	4403							
G	heck	all that apply: X Init	ial return		In	itial return of a fo	ormer public o	harity	D 1. Foreign organization:	s, check here
		Fina	al return		Ar	mended return			ا ء ۔	
			dress chang			ame change			Foreign organizations me check here and attach co	omputation
H_C	_					te foundation			E If private foundation sta	itus was terminated
<u>L</u>	_ Se	ction 4947(a)(1) nonexempt c	haritable tru	st 📖	Other taxab	le private founda	ation		under section 507(b)(1)(A), check here
I Fa	ir ma	arket value of all assets at end o	of year J	_	-		Accr	ual	F If the foundation is in a	60-month termination
		Part II, col (c), line 16)		L 0	ther (specify	()			under section 507(b)(1)(B), check here
	\$	5,100,8	809 J (Pá	art I, colu	ımn (d) mu	st be on cash I	basis)			
P	ırt I	Analysis of Revenue and Ex (The total of amounts in columns	(penses (b), (c), and (d)	may not	(a) Re	evenue and		vestment	(c) Adjusted net	(0) Disbursements for charitable purposes
		necessarily equal the amounts in	column (a))			ses per books	inco	ome	income	(cash basis only)
	1	Contributions, gifts, grants, et			5,4	06,105.				
	2	Check I if the foundation is no	ot required to attac	h Sch B		0.010		0 010		(m) mm:
	3	Interest on savings and temporary cash investments				2,812.		2,812.		STATEMENT 2
	4	Dividends and interest from s	ecurities							
	5a	Gross rents								
	b	Net rental income or (loss)				11 100				
⊕	6a	Net gain or (loss) from sale of asset Gross sales price for all				11,489.				STATEMENT 1
ent	b	assets on line 6a	,417, 5	94.			F 44	F 000		
Revenue	7	Capital gain net income (from Part	IV, line 2)				5,41	<u>5,809.</u>		
_	8	Net short-term capital gain							45.0	
	9	Income modifications Gross sales less returns							RECEIVED	4
	10a	Gross sales less returns and allowances								178
		Less Cost of goods sold			ļ				97 2015	101
		Gross profit or (loss)			ļ			3	111111111111	3
	11	Other income			F 4	20 406	E 41	0 621		
	12	Total. Add lines 1 through 11			5,4	20,406.	5,41	8,621.	OCDEN,9.	0.
	13	Compensation of officers, directors						<u>0</u> .	00-	T 0.
	14	Other employee salaries and v	-							
S		Pension plans, employee ben-	enis STMT	١ 3		29,144.		0.	0.	29,144.
penses		Legal fees	SIMI			23,144.			· · · · · ·	25,144.
		Accounting fees Other professional fees	STMT	١ ٨		20,000.		0.	0.	20,000.
ē E	17	Interest	DIM	-		20,000.		•	•	20,000.
Operating and Administrative Ex	18	Taxes	STMT	٠ 5	1	10,000.	11	0,000.	0.	0.
stra	19	Depreciation and depletion	OIM		├	10,000.		0,000.	•	
Ë	20	Occupancy					•			
βď	21	Travel, conferences, and mee	tinge			-				
ē	22	Printing and publications	ungs		 					
ē	23	Other expenses	STMT	٠ 6		71.		0.	0.	71.
ij		Total operating and administ		Ū						7
era		expenses. Add lines 13 throu			1 1	59,215.	11	0,000.	0.	49,215.
Ö	25	Contributions, gifts, grants pa	-		$\frac{1}{1}$	60,382.		 		160,382.
		Total expenses and disburse				00,0020				200/0021
		Add lines 24 and 25			3	19,597.	11	0,000.	0.	209,597.
	27	Subtract line 26 from line 12;			 	,_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		-,	<u> </u>	
		Excess of revenue over expenses a	and dishurace	ente	5.1	00,809.				1
		Net investment income (if neg				-0,000	5.30	8,621.		
		Adjusted net income (if negative		•			2,00	-,	0.	
		j=====viiioviiio (ii nagatii	_, ·v j							

423501 11-24-14 LHA For Paperwork Reduction Act Notice, see instructions.

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6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

	MICHELSON FOUND					4	6-497	8561	Page 3
<u> </u>	and Losses for Tax on In		t Income	I /KVII ou		,		T	
	ibe the kind(s) of property sold (e.g. rehouse; or common stock, 200 shs			(b) HOW	/ acquired urchase	(c) Date a (mo., da	cquired	(d) Dat (mo., da	
440 500 600		WILU UU.)		D-D	onation D	01/0		04/0	
	BAFEWAI INC.			 		01/0	1/86	04/0	±/14
D				-		 	•	 	
d						 		 	
e				<u> </u>		 		 	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				in or (loss (f) minus		
a 5,417,594.			1,78	5.				5,415	,809.
b							-	_	
С									
d									
<u>e</u>									
Complete only for assets snowin	g gain in column (h) and owned by t			_		(I) Gains (C col. (k), but r	ol. (h) gair ot less tha	n minus	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i)	1		Losses	(from col.	(h))	
				-+-				5,415	800
<u>a</u> b				+				J, 41J	,003.
c							-		
d								<u>" </u>	
e									
 Capital gain net income or (net ca Net short-term capital gain or (los If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8 	ss) as defined in sections 1222(5) an	- ın Part I, lıne	7 27	} } }	3		N/2	5,415 A	,809.
Part V Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	Inves	tment li	ncome			
(For optional use by domestic private	foundations subject to the section 4	1940(a) tax or	n net investment ir	ncome.)				N/A	
If section 4940(d)(2) applies, leave the	nis part blank.								
Was the foundation liable for the sec If "Yes," the foundation does not qual			•	rıod?				Yes	X No
	each column for each year; see the II	nstructions be	efore making any e	entries.					
(a) Base period years Calendar year (or tax year beginni	ng in) Adjusted qualifying dis	tributions	Net value of no	(c) oncharita	ble-use asse	ets	Dıstr (col. (b) d	(d) ibution ratio ivided by col	. (c))
2013									
2012			ļ		_				
<u>2011</u> 2010					_				
2009			 		_				
2003			<u></u>			 -			
2 Total of line 1, column (d)						2			
3 Average distribution ratio for the	5-year base period - divide the total o	on line 2 by 5,	or by the number	r of vears			~		
the foundation has been in existe		• ,	•	•		3			
4 Enter the net value of noncharitat	ole-use assets for 2014 from Part X,	line 5				4			
5 Multiply line 4 by line 3						5			

6 Enter 1% of net investment income (1% of Part I, line 27b)

 ${\bf 7}\quad {\bf Add\ lines\ 5\ and\ 6}$

8 Enter qualifying distributions from Part XII, line 4

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

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Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	948 -	see ir	nstru	ctio	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.					
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%	1		10	6,1	<u>72.</u>
of Part I, line 27b					
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	l				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3 Add lines 1 and 2	3		<u>10</u>	6,1	<u>72.</u>
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				<u>0.</u>
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		10	<u>6,1</u>	72.
6 Credits/Payments:					
a 2014 estimated tax payments and 2013 overpayment credited to 2014 6a 110,000.					
b Exempt foreign organizations - tax withheld at source					
c Tax paid with application for extension of time to file (Form 8868)					
d Backup withholding erroneously withheld	ļ				
7 Total credits and payments. Add lines 6a through 6d	7		11	0,0	00.
8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	8			_	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			3,8	
11 Enter the amount of line 10 to be: Credited to 2015 estimated tax 3,828. Refunded	11				0.
Part VII-A Statements Regarding Activities					
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	n			Yes	
any political campaign?	_		1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?		Ļ	1b		Х
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	d or				1
distributed by the foundation in connection with the activities		Ì			
c Did the foundation file Form 1120-POL for this year?		F	1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					1
(1) On the foundation. \$\begin{align*} 0 \cdot \text{(2)} On foundation managers. \$\begin{align*} \left(\text{any} \) \text{points foundation during the very foundation managers.} \end{align*}					1
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0 •		į			1
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?					v
If "Yes," attach a detailed description of the activities		ŀ	2	_	X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		i			1
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		ŀ	3		x
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		-	4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		′	5		x
If "Yes," attach the statement required by General Instruction T		ŀ			 -
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		į			1
By language in the governing instrument, or		1			1
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state legislation.	law				l
remain in the governing instrument?		i	6	X	1
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		T I	7	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions)					
CA					1
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					1
of each state as required by General Instruction G? If "No," attach explanation			8b	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calen	dar				
year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		х
10 Did any persons become substantial contributors during the tax year? If Yes, attach a schedule listing their names and addresses SD	TMT	_7	10	X	
		C	000	DE /	0014

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Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, ent	ter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	᠋	> 0
Part X A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant state number of organizations and other beneficiaries served, conferences convened, research papers pro-	tistical information such as the oduced, etc.	Expenses
1 N/A		
2		
3		1
4		
PartIX=B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year of	on lines 1 and 2.	Amount
1N/A		
2		
All other program-related investments. See instructions. 3		_
		<u> </u>
Total. Add lines 1 through 3	.	Form 990-PF (2014)

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	see instructions)
_	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	0.
ь		1b	0. 4,066,522.
	Fair market value of all other assets	1c	4,000,322.
ď	Total (add lines 1a, b, and c)	1d	4,066,522.
e	Reduction claimed for blockage or other factors reported on lines 1a and	- " 	2700075227
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	4,066,522.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	60,998.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4	5	4,005,524.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	176,135.
F	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	d certain	
_	foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	176,135.
2a	Tax on investment income for 2014 from Part VI, line 5		
b			
C	Add lines 2a and 2b	2c	106,172.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	69,963.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	69,963.
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	69,963.
F	Part XII Qualifying Distributions (see instructions)		,
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
8	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	209,597.
b		1b	209,597.
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:		
8	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	209,597.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	209,597.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies fo	

Part XIII Olidistributed ilicollie (si				
·	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				69,963.
2 Undistributed income, if any, as of the end of 2014				09,903.
a Enter amount for 2013 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2014:			-	
a From 2009				
b From 2010				
c From 2011			İ	
d From 2012				
e From 2013				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2014 from				
Part XII, line 4: ►\$ 209,597.				1
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				I
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount	120 624			69,963.
e Remaining amount distributed out of corpus	139,634.			
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:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	139,634.			ı
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		1		,
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	0.			
may be required - see instructions) 8 Excess distributions carryover from 2009	<u> </u>			
-	0.			
not applied on line 5 or line 7 9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	139,634.			
10 Analysis of line 9:	133,031.			
a Excess from 2010				
b Excess from 2011				
c Excess from 2012				
d Excess from 2013				
e Excess from 2014 139,634.			İ	
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Part XIV Private Operating F			II-A, question 9)	N/A	
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective for		•	▶	T	
b Check box to indicate whether the found		g foundation described		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(h) 2012	Prior 3 years	74) 2011	(a) Total
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for					
each year listed			 		
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed			 		
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities			+		
e Qualifying distributions made directly					
for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the			 		
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets			ļ	_	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public	· **.2=				
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income			ļ		
Rant XV Supplementary Info	rmation (Comple	te this part only	if the foundation	on had \$5,000 or m	ore in assets
at any time during t		uctions.)			
 Information Regarding Foundation List any managers of the foundation wh 	•	than 2% of the total con	tributions received by the	ne foundation before the clo	nce of any tay
year (but only if they have contributed in	nore than \$5,000). (See s	ection 507(d)(2).)	and another received by a	ie ioditaation before the cit	asc of any tax
MICHAEL W. MICHELSON			/ " ·		
b List any managers of the foundation who other entity) of which the foundation has	o own 10% or more of the s a 10% or greater interes	e stock of a corporation it.	(or an equally large poi	tion of the ownership of a p	partnersnip or
NONE					_
2 Information Regarding Contribution Check here ☐ if the foundation of	nly makes contributions t	o preselected charitable	organizations and does	s not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, etc.					o o.
a The name, address, and telephone num			lications should be addi	ressed:	
SUSAN P. SCHOENTHALE 2755 CAMPUS DRIVE, S			77 04403		
b The form in which applications should be					
APPLICATIONS SHOULD				JEST	
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographica	l areas, charitable fields	, kinds of institutions, o	r other factors:	
NONE					

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation **Amount** status of Name and address (home or business) recipient a Paid during the year SEE STATEMENT A NONE ÞС UNRESTRICTED 160,382. **▶** 3a 160,382. b Approved for future payment BRING ME A BOOK FOUNDATION NONE UNRESTRICTED ÞC 570 BL CAMINO REAL REDWOOD CITY, CA 94063 248,970. Total 248,970.

2014.03040 THE MICHELSON FOUNDATION

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Inter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code	741104111	
å	_				
b	_				
<u> </u>	_			_	
<u> </u>					
e	_		_	·	
<u></u>	_				
g Fees and contracts from government agencies			-		
2 Membership dues and assessments					
3 Interest on savings and temporary cash			امما	0.010	
investments	<u> </u>	·	14	2,812.	
4 Dividends and interest from securities	<u> </u>		4		
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property	<u> </u>				
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other	ł			44 400	
than inventory			18	11,489.	
9 Net income or (foss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:	}				
8	_				
b	_				
c	_				
d			\bot		· · · · · · · · · · · · · · · · · · ·
e					
e 12 Subtotal. Add columns (b), (d), and (e)		0	•	14,301.	0
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)			•	14,301.	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)	.)	0			
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.				13	14,301
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities	s to the Acco	mplishment of l	Exemp	t Purposes	14,301
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Part 2	(VII)		garding Tran	sfers To a	and Trans	actions a	nd Relations	hips With Noncha	ritabl	e	ago 10
1 Did	the ord	Exempt Organ panization directly or indirectly or indirect		of the followin	o with any oth		n described in sect	on 501(a) at	,	TV an	No
		other than section 501(c)						וסוו סטוו(כ) פוז	١,	Yes	NO
		from the reporting founda				Ollical Olyani	ZZUUIIST				
					-				18(1)	.l	x
(2)	Other									_	X
		sactions:				• •• ••		••• ••• • ••••	1	1 .	74.3
(1)	Sales	of assets to a noncharital	ble exempt organiza	tion					15(1)		X
(2)	Purch	ases of assets from a nor	ncharitable exempt (organization					1b(2		X
(3)	Renta	l of facilities, equipment, (or other assets						1b(3)	4	X
(4)	Relmt	oursement arrangements							1b(4)		X
(5)	Loans	s or Ioan guarantees 👑							1b(5)		X
(6)	Perfor	rmance of services or me	mbership or fundral	sing solicitatio	ns				1b(6)		X
c Sha	ering of	facilities, equipment, ma	iling lists, other asse	ets, or paid em	ployees				1c		X
d Ifti	ne answ	ver to any of the above is	"Yes," complete the	following sche	dule. Column ((b) should alw	ays show the fair r	narket value of the goods,	other as	sets,	
						r market value	e in any transaction	or sharing arrangement, s	how in		
) the value of the goods,					1.40	<u> </u>			
(8)Line n	<u>-</u>	(b) Amount involved	(c) Name o		exempt organ	ization	(d) Description	of transfers, transactions, and	sharing &	rengeme	ints
	┿			N/A			<u>_</u>				
	┿-						<u> </u>				
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	+										
		,					-				
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	1			_			<u> </u>				
	\top							· · · · · · · · · · · · · · · · · · ·			
		idation directly or indirect									
in s	ection	501(c) of the Code (other	than section 501(c)(3)) or in sect	tion 527?				Yes	X] No
b lf "	es," co	mplete the following sch									
		(a) Name of org	anization		(b) Type of o	rganization		(c) Description of relations	hip		
		N/A									
					ļ						
					ļ						
			 								
	Linder	penalties of perjuly, I declare	that I have examined th	s ratum includio	a eccompendad	echedules and s	statements and to the	heat of my knowledge			
Sign	and be	penalties of perfury, I declare to	plete. Declaration of pr	eparer (other thau	n taxpayer) is bas	ed on all informa	ation of which prepare	T I MA	y thains Im with ti	discuss he prepar	this 'er
Here	-	\-w/1	- (/		101		TREASU		Yes	he prepar v (see tris	
	Sian	ature(of officer or trustee			Date	7/12	Title		OLJ Yes	, L	J No
	1 2.81.	Print/Type preparer's na		Preparer's si			Date	Check If IPTIN			—
			=		J	ļ		self- employed			
Paid		ANNE F. ME	NNELLA	Dans.	4-100	e e e e	5114/16	• •	1221	466	
Prepa	arer	Firm's name ▶ DEL		LLP	i i par	-x KVK	431/31	Firm's EIN ▶ 86-1			
Use (Only								- ·		
	-	Firm's address ▶ 16	33 BROADW	AY		· ···			_		
	_	NE.	W YORK, N	Y 1001	9-6754			Phone no. 212-4	92-3	600	ı

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.lrs.gov/form990.

OMB No 1545-0047

2014

Name of the organization

Employer identification number

T1	HE MICHELSON FOUNDATION	46-4978561
Organization type (check of	one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	is covered by the General Rule or a Special Rule . 2)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	See instructions
General Rule	, , , (-, , -, (-, , -, g.,	
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$ y one contributor Complete Parts I and II. See instructions for determining a contributor's	
Special Rules		
sections 509(a)(1) any one contribut	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, o tor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount Z, line 1 Complete Parts I and II	r 16b, and that received from
year, total contrib	on described in section 501(c)(7), (8), or (10) filling Form 990 or 990-EZ that received from an outions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educat cruelty to children or animals Complete Parts I, II, and III	- · · · · · · · · · · · · · · · · · · ·
year, contribution s-checked, enter- purpose Do not c	on described in section 501(c)(7), (8), or (10) filling Form 990 or 990-EZ that received from an is exclusively for religious, charitable, etc., purposes, but no such contributions totaled more the total contributions that were received during the year-for-an exclusively religious, complete any of the parts unless the General Rule applies to this organization because it rolle, etc., contributions totaling \$5,000 or more during the year	e than \$1,000 If this box chantable, etc ,— — — —
but it must answer "No" or	that is not covered by the General Rule and/or the Special Rules does not file Schedule B (n Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its For et the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	•

Name of organization

Employer identification number

THE MICHELSON FOUNDATION

46-4978561

		7 4770301
Contributors (see instructions) Use duplicate copies of Part I if	f additional space is needed.	
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
MICHAEL W. MICHELSON 2755 CAMPUS DRIVE, SUITE 240 SAN MATEO, CA 94403	\$\$,406,105.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	\$	Person Payroll (Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	\$	Person Payroll Noncash Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	 s	Person Payroll Oncash (Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
D5-14	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions) 1990, 990-EZ, or 990-PF) (2014)
	(b) Name, address, and ZIP + 4 MICHAEL W. MICHELSON 2755 CAMPUS DRIVE, SUITE 240 SAN MATEO, CA 94403 (b) Name, address, and ZIP + 4 Name, address, and ZIP + 4 Total contributions	

Employer identification number

THE MICHELSON FOUNDATION

46-4978561

art II	Noncash Property (see instructions) Use duplicate copies of Par	rt II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	142,792 SHARES SWY		
		\$ 5,406,105.	04/02/14
(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
		_	

Name of org	ganization		Employer identification number					
ጥዘዊ Mi	CHELSON FOUNDATION		46-4978561					
Part III	Exclusively religious, charitable, etc., contine year from any one contributor. Complete completing Part III, enter the total of exclusively religious. Use duplicate copies of Part III if additions	s, charitable, etc., contributions of \$1,000	ed in section 501(c)(7), (8), or (10) that total more than \$1,000 for					
(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, ar	10 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, at	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, a	nd 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 g	gift					
	Transferee's name, address, a		Relationship of transferor to transferee					
	<u> </u>							

423454 11-05-14

FORM 990-PF GAIN C	OR (LOSS) FRO	OM SALE	OF ASS	ETS	STATEMENT 1	
(A) DESCRIPTION OF PROPERTY				NER DA IRED ACQU	TE IRED DATE SOLD	
142,792 SHS OF SAFEWAY INC.			DONA	TED 01/0	1/86 04/04/14	
	(C) LUE AT C OF ACQ.	(D) EXPENSE SALE		(E) DEPREC.	(F) GAIN OR LOSS	
5,417,594.	,406,105.		0.	0.	11,489.	
CAPITAL GAINS DIVIDENDS FROM	I PART IV				0.	
TOTAL TO FORM 990-PF, PART I	, LINE 6A			:	11,489.	
FORM 990-PF INTEREST ON SAV			CASH I			
SOURCE	(A) REVENUE PER BOOKS		(B) NET INVESTMENT INCOME		(C) ADJUSTED NET INCOME	
GOLDMAN SACHS A/C #1344 GOLDMAN SACHS A/C #1385		2,798. 14.			2,798. 14.	
TOTAL TO PART I, LINE 3		2,812.		2,812.	2,812.	
FORM 990-PF	LEGA	L FEES			STATEMENT 3	
	(A) EXPENSES	NET I	B) NVEST-	(C) ADJUSTE		
DESCRIPTION	PER BOOKS	MENT]	INCOME	NET INCO	ME FORFOSES	
DESCRIPTION LEGAL - FEES						

FORM 990-PF C	THER PROFES	SIONAL FEES	STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
PROFESSIONAL FEES	20,000.	0.	0.	20,000.	
TO FORM 990-PF, PG 1, LN 16C	20,000.	0.	0.	20,000.	
FORM 990-PF	TAXES		STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FEDERAL TAXES	110,000.	110,000.	0.	0.	
TO FORM 990-PF, PG 1, LN 18	110,000.	110,000.	0.	0.	
FORM 990-PF	OTHER EXPENSES		STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
MISCELLANEOUS EXPENSES	71.	0.	0.	71.	
TO FORM 990-PF, PG 1, LN 23	71.	0.	0.	71.	

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS
PART VII-A, LINE 10

STATEMENT

7

NAME OF CONTRIBUTOR

ADDRESS

MICHAEL W. MICHELSON

2755 CAMPUS DRIVE, SUITE 240 SAN MATEO, CA 94403

MICHELSON FOUNDATION EIN: 46-4978561 December 31, 2014

Cash Contributions	Year-to-Date	
America Prairie Reserve	\$	3,000
Bring Me A Book Foundation (Pledge Payment)		107,132
California Highway Patrol		250
Common Good		5,000
Dawn Redwoods Trust (Bohemian)		1,500
Kukio Community Fund		5,000
Metropolitan Family Service (Pledge Payment)		5,000
Peninsula Bridge		2,500
Springfield Area Educational Foundation		5,000
The Basic Fund		10,000
The Ideal School (10th Annual Gala)		10,000
The Michael J Fox Foundation		5,000
The National World War II Museum (Patriots)		1,000
Total Cash Contributions	\$	160,382
Total Grants Paid	\$	160,382