

# See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



# Form **990-PF**

**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

2014

For calendar year 2014 or tax year beginning and ending A Employer identification number Name of foundation 57-1217948 WILLIAM MALE FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Boom/suite B Telephone number P.O. BOX 232536 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ENCINITAS, CA 92023 Initial return of a former public charity D 1. Foreign organizations, check here G Check all that apply Initial return Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation Check type of organization E If private foundation status was terminated  $\square$  Section 4947(a)(1) nonexempt charitable trust  $\square$ Other taxable private foundation under section 507(b)(1)(A), check here X Cash I Fair market value of all assets at end of year | J Accounting method Accrual F If the foundation is in a 60-month termination Other (specify) under section 507(b)(1)(B), check here (from Part II, col (c), line 16) 30,073. (Part I, column (d) must be on cash basis.) ▶\$ Part 1 Analysis of Revenue and Expenses (d) Disbursements for chantable purposes (cash basis only) (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessanly equal the amounts in column (a) ) expenses per books income income 20,505 Contributions, gifts, grants, etc., received 2 Check if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 3 396.STATEMENT 396. 396. Dividends and interest from securities 5a Gross rents Net rental income or (loss) SCANNED DEC 9 3 2015 <481. 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 8,843. 0. 7 Capital gain net income (from Part IV, line 2) o. 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 20,420 396 396 12 Total. Add lines 1 through 11 0. 0 0. 0. 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits Rec in Hatching/ NOV 3 N 2015' Comes Oc. 4,660. 4,660. 16a Legal fees STMT 2 0. 0 O. STMT 1,895. 0 1,895. **b** Accounting fees c Other professional fees 17 Interest 42. 0. STMT 4 0 42. 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative 6,597 0 6,597. expenses. Add lines 13 through 23 0 1,300 Contributions, gifts, grants paid 1,300. 26 Total expenses and disbursements. 7,897 0. 7,897. Add lines 24 and 25 0 27 Subtract line 26 from line 12 12,523 2 Excess of revenue over expenses and disbursements 396 b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) 396.

Dani	Balance Sheets Attached schedules and amounts in the description column should be for end-of-user amounts only	Beginning of year	End of	year
	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing			
2	Savings and temporary cash investments			· · · · · · · · · · · · · · · · · · ·
3	Accounts receivable		<i>:</i>	
ļ	Less allowance for doubtful accounts		· · · · · · · · · · · · · · · · · · ·	
4	Pledges receivable -		-	
	Less allowance for doubtful accounts			<del></del>
5	Grants receivable			
6	,,			
	disqualified persons			
7	Other notes and loans receivable			
	Less allowance for doubtful accounts	_		
8   <u>پ</u> د	Inventories for sale or use			
Assets	Prepaid expenses and deferred charges			
<b>⋖</b>  10	a Investments - U.S. and state government obligations			
	b Investments - corporate stock STMT 5	20,067.	31,248.	30,073.
	c Investments - corporate bonds	ļ		
11	Investments - land, buildings, and equipment basis			
	Less: accumulated depreciation			
12	Investments - mortgage loans			
13			<del> </del>	· · · · · · · · · · · · · · · · · · ·
14				
	Less. accumulated depreciation			
	Other assets (describe			
16	Total assets (to be completed by all filers - see the	00.067	21 242	20 072
+	instructions Also, see page 1, item I)	20,067.	31,248.	30,073.
- 1	Accounts payable and accrued expenses			
18	• •			
9 19				
Liabilities 51				
ig   21		2,403.	1 061	}
-  22	2 Other liabilities (describe ► STATEMENT 6)	2,403.	1,061.	
25	Total lightiffing (add loans 17 through 00)	2,403.	1,061.	
- 20	Total liabilities (add lines 17 through 22)	2,403.	1,001.	
	Foundations that follow SFAS 117, check here			
8 24	and complete lines 24 through 26 and lines 30 and 31 Unrestricted			
25 and				
Net Assets or Fund Balan	•			
֓֞֟֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֟֓֓֓֓֟֓֓֓֓֟֓֓֟֓֓֟	Foundations that do not follow SFAS 117, check here			
ᅙ	and complete lines 27 through 31.			
Ö 27	-	0.	0.	
Sets 28		0.	0.	
AS 2		17,664.	30,187.	
₹ 30		17,664.	30,187.	
_   ``			25,157.	
31	Total liabilities and net assets/fund balances	20,067.	31,248.	
	till Analysis of Changes in Net Assets or Fund E			I
	tal net assets or fund balances at beginning of year - Part II, column (a), line		<del></del>	
	sust agree with end-of-year figure reported on prior year's return)			17,664.
<b>2</b> En	ter amount from Part I, line 27a		. 2	17,664. 12,523.
			· · · · · · · · · · · · · · · · · · ·	

Beginning of year

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	17,664.
2	Enter amount from Part I, line 27a	2	12,523.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	30,187.
5	Decreases not included in line 2 (itemize)	5	0.
<u>6</u>	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	30,187.

423511 11-24-14

Form **990-PF** (2014)

Part IV	Capital Gains a	nd Losses for Tax on	Investment	Income						
		be the kind(s) of property sold ( ehouse, or common stock, 200		<del></del>	(b) l	How ac - Purc - Dona	nase   `	<b>c)</b> Date acquire (mo , day, yr )		
1a SUN	HYDRAULICS,	INC., 100 SHS	S					2/26/1		1
		INC., 75 SHS						2/26/1		
	HYDRAULICS,	INC., 50 SHS					D 1	2/26/1	3 02/24/14	<u>1</u>
<u>d</u>										
<u>e</u>	· T	45 Depresenting allowed	(7) 000	A a- alban basis	Щ			(b) Corp. on (	laas)	—
(e)	Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale				(h) Gain or ( (e) plus (f) mi	nus (g)	
<u>a</u>	4,091.			4,14					<53	
_b	2,646. 2,106.			3,10 2,07					<462 34	
<u>C</u>	2,100.			2,01	2 •	-	<del>-</del> -			<u>* •</u>
e						_			· · · · · · · · · · · · · · · · · · ·	
	ete only for assets showing	gain in column (h) and owned	by the foundation	on 12/31/69			(1)	Gains (Col (h)	gain minus	
	VIV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (i)				(k), but not less Losses (from (	than -0-) <b>or</b>	
		as 01 12/3 1/09	over	col (j), if any		-			<53	<del></del> ,
<u>a</u>				<del>.</del>					<462	
C C			<del>-  </del>				<del></del>		34	
d					-					•
e e			-							
		(If gain, also a	nter in Part I, line	7	7					
2 Capital (	gain net income or (net cap		r -0- in Part I, line		•	2			<481	L .
3 Net sho	rt-term capital gain or (loss	) as defined in sections 1222(5								
	also enter in Part I, line 8, c		, (- ,		1					_
	enter -0- in Part 1, line 8	nder Section 4940(e)	<u> </u>		71	3			<481	<u> </u>
Was the for	foundation does not qualif	on 4942 tax on the distributable y under section 4940(e). Do no ach column for each year, see ti	t complete this pa	ırt		<del></del> -			Yes X N	10
	(a) Base period years	(b)		•	(c)		. <del>.</del>		(d) Istribution ratio	_
Calendai	year (or tax year beginning	g in) Adjusted qualifying		Net value of no	nchai	ritable		(col (t	) divided by col (c))	
	2013		14,819.				0	•	.00000	
	2012		21,849.		_		0		.00000	
	2011		25,322. 1,444.	-		_	0		.00000	
	2010 2009		1,762.				0		.00000	
	2003							•	•00000	
2 Total of	line 1, column (d)							2	.00000	00
		year base period - divide the to	otal on line 2 by 5,	or by the number	of ye	ars				_
	idation has been in existen		, ,		•			3	.00000	<u>00</u>
4 Enterth	e net value of noncharitable	e-use assets for 2014 from Part	t X, line 5					4		
5 Multiply	line 4 by line 3							5	C	o .
6 Enter 19	% of net investment income	e (1% of Part I, line 27b)	-			•		6	4	4 <u>.</u>
7 Add line	s 5 and 6							7		— 4.
R Entara	ialifiuna dietributione from	Part VII line 4		*****	-	•••			-	
If line 8	ualifying distributions from is equal to or greater than Part VI instructions	ran XII, line 4 line 7, check the box in Part VI,	line 1b, and comp	olete that part using	g a 1º	 % tax	rate	8	7,897	<u>/ •</u>
423521 11-2	<del></del>	<del></del>							50 000 DE (00	

. '	AND THE PROPERTY OF THE PROPER	57	1217	010		D 4
	1990-PF (2014) WILLIAM MALE FOUNDATION wrt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4					Page 4 ns)
	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1					· <del>*</del>
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)					
h	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1	]			4.
-	of Part I, line 27b	ļ	· ···	······································	•	
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	1			0.
	Add lines 1 and 2	3	<u> </u>			4.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	ļ			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter-0-	5				4.
	Credits/Payments					
	2014 estimated tax payments and 2013 overpayment credited to 2014 6a					
	Exempt foreign organizations - tax withheld at source 6b					
	Tax paid with application for extension of time to file (Form 8868)	1				
	Backup withholding erroneously withheld 6d					
	Total credits and payments Add lines 6a through 6d	7	1			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	g				4.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be Credited to 2015 estimated tax	11				
	rt 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	ın			Yes	No
	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	)?		1b		X
	If the answer is "Yes" to 18 or 16, attach a detailed description of the activities and copies of any materials published					
	distributed by the foundation in connection with the activities.					
C	Did the foundation file Form 1120-POL for this year?			10		X
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
	(1) On the foundation ▶ \$ 0 . (2) On foundation managers ▶ \$ 0 .	_				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers > \$O.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	-		2		X
	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	of "Yes," has it filed a tax return on Form 990-T for this year?	N	I/A	4b		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction $\mathcal{T}$ .					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state in the state of the state	e law			17	
_	remain in the governing instrument?			6	X	
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 XI	<i>'</i> .		7	X	<del>,</del>
•	Catantha states to which the foundation was also assist which is a six of the state					
88	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	CA					
C	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				v	
0	of each state as required by General Instruction G? If "No," attach explanation			8b	X	-
9	5	endar			v	1
40	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV	·mxa		9	X	-

had not been removed from jeopardy before the first day of the tax year beginning in 2014?

423551

Total. Add lines 1 through 3

P	Minimum Investment Return (All domestic foundations mu	ist complete this part. Foreign f	oundations, see i	nstructions.)
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.
	Average of monthly cash balances		1b	
	Fair market value of all other assets		10	
d	Total (add lines 1a, b, and c)		1d	0.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	· ·	1e	).	
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	0.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, s	ee instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on	·	5	0.
6	Minimum investment return. Enter 5% of line 5		6	0.
P	<b>Distributable Amount</b> (see instructions) (Section 4942(j)(3) and foreign organizations check here   X and do not complete this part)	(j)(5) private operating foundations	and certain	
1	Minimum investment return from Part X, line 6		1	
2a	Tax on investment income for 2014 from Part VI, line 5	2a		
b	Income tax for 2014 (This does not include the tax from Part VI)	2b		
C	Add lines 2a and 2b		2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	
4	Recoveries of amounts treated as qualifying distributions		4	
5	Add lines 3 and 4		5	
6	Deduction from distributable amount (see instructions)		6	
7_	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part X	III, line 1	7	
P	Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpo	oses		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26		1a	<u>7,897.</u>
b	Program-related investments - total from Part IX-B		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable	e, 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	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and	i Part XIII, line 4	4	7,897.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net inves	tment		
	income. Enter 1% of Part I, line 27b		5	4.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	7,893.
	Note: The amount on line 6 will be used in Part V. column (b), in subsequent years with	en calculating whether the foundati	on qualifies for the	section

Form **990-PF** (2014)

4940(e) reduction of tax in those years

Part XIII Undistributed Income (see	e instructions)	N/A		
	(a)	(b)	(c)	(d)
_	Corpus	Years prior to 2013	2013	2014
1 Distributable amount for 2014 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			+	4 1 4
b Total for prior years				
3 Excess distributions carryover, if any, to 2014				· · · · · · · · · · · · · · · · · · ·
a From 2009				
<b>b</b> From 2010				
c From 2011				
d From 2012				
e From 2013				
f Total of lines 3a through e				
4 Qualifying distributions for 2014 from				
Part XII, line 4 > \$				
a Applied to 2013, but not more than line 2a			<del></del>	<del> </del>
b Applied to undistributed income of prior				
years (Election required - see instructions)  c Treated as distributions out of corpus		<del> </del>		<del>                                     </del>
(Election required - see instructions)				
d Applied to 2014 distributable amount		<del>-  </del>		<b>1</b>
e Remaining amount distributed out of corpus	······			
5 Excess distributions carryover applied to 2014		<del>                                     </del>	to the electronial transfer of	
(If an amount appears in column (d), the same amount must be shown in column (a) )	<del></del>			
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	····			
b Prior years' undistributed income Subtract				
line 4b from line 2b	······		<u> </u>	
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				
d Subtract line 6c from line 6b Taxable				
amount - see instructions				-
e Undistributed income for 2013 Subtract line				
4a from line 2a Taxable amount - see instr f Undistributed income for 2014 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				
7 Amounts treated as distributions out of		<del>·   :</del>	<del>- [</del>	
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)				
8 Excess distributions carryover from 2009		<del>                                      </del>	<del>, , , , , , , , , , , , , , , , , , , </del>	
not applied on line 5 or line 7				
9 Excess distributions carryover to 2015.				***************************************
Subtract lines 7 and 8 from line 6a			-	
10 Analysis of line 9	<del></del>		<del></del>	•
a Excess from 2010				
b Excess from 2011				
c Excess from 2012				
d Excess from 2013		1		,,
8 Excess from 2014 423581	***	* * *		

Part XIV Private Operating F	<b>oundations</b> (see ins	structions and Part VII-	A, question 9)	<u> </u>	
1 a If the foundation has received a ruling o			0.4.4	21 /25	
foundation, and the ruling is effective fo				21/05	
<b>b</b> Check box to indicate whether the found		g foundation described ii		4942(j)(3) or 4942	<u>2(j)(5)</u>
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		4-1-4-4
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	0.	0.	0.	0.	0.
b 85% of line 2a	0.	0.	0.	0.	0.
c Qualifying distributions from Part XII,					
line 4 for each year listed	7,897.	14,826.	21,849.	25,322.	69,894.
d Amounts included in line 2c not					
used directly for active conduct of				. 1	
exempt activities	0.	0.	0.	0.	0.
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c	7,897.	14,826.	21,849.	25,322.	69,894.
3 Complete 3a, b, or c for the					
atternative test relied upon a "Assets" atternative test - enter					
(1) Value of all assets	·	1			0.
(2) Value of assets qualifying				· -	
under section 4942(j)(3)(B)(i)					0.
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed					0.
c "Support" alternative test - enter					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
secunties loans (section 512(a)(5)), or royalties)					0.
(2) Support from general public					
and 5 or more exempt	i:	1			
organizations as provided in section 4942(j)(3)(B)(III)					0.
(3) Largest amount of support from					
an exempt organization					0.
(4) Gross investment income					0.
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5.000 or mo	
at any time during			., .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	40,000 01	
1 Information Regarding Foundation		· · · · · · · · · · · · · · · · · · ·			
a List any managers of the foundation wi	-	than 2% of the total cont	ributions received by the	foundation before the close	of any tax
year (but only if they have contributed in			noutions reconved by the		or any tax
NONE	, , ,	, , .			
b List any managers of the foundation wi	no own 10% or more of th	ne stock of a corporation	for an equally large portion	in of the ownership of a par	tnership or
other entity) of which the foundation ha			to an equally large point	m of the ownership of a par	thership of
NONE	·				
2 Information Regarding Contribut	tion Grant Gift Loan	Sahalamhia ata Di	'AATAMC'		
Check here  if the foundation		• • • • •	•	at account uncollected reque	ete for funde. If
the foundation makes gifts, grants, etc					
	<del>`</del>	*	<del></del>		
a The name, address, and telephone nun WILLIAM MALE	iber or e-mail address or	the person to whom appi	cations should be addres	S80	
P.O. BOX 232536, ENG	מי פמידוודי	92023			
			and an alorday		
b The form in which applications should WRITTEN APPLICATION		LUON AND MATERIAIS THEY S		<del></del>	<del>-</del>
c Any submission deadlines FLEXIBLE.					
d Any restrictions or limitations on award					
APPLICANTS MUST BE				'S OF SAN DIE	GO COUNTY
AND SHOULD DEMONSTRA	ATE POTENTIA	L FOR THE A	KTS.		<del></del>
423601 11-24-14					Form <b>990-PF</b> (2014

423611 11-24-14 Form **990-PF** (2014)

## Part XVI-A Analysis of Income-Producing Activities

nter gross amounts unless otherwise indicated	Unrelate	d business income		ed by section 51	2, 513, or 514		(e)
·	(a) Business	(b) Amount	(c) Exclu- sion	(c Amo		1	or exempt
Program service revenue	code		code			12.104.1	
a	_					<del>  -</del>	<del></del>
b	_	<u> </u>					
			$\rightarrow$				
d	_		$\perp$				
0	_						<del></del>
f	_					_	
g Fees and contracts from government agencies							
Membership dues and assessments							
Interest on savings and temporary cash							
investments							
Dividends and interest from securities			14		396	•	
Net rental income or (loss) from real estate							
a Debt-financed property							
b Not debt-financed property				-			
Net rental income or (loss) from personal				-	<del> </del>		
property							
Other investment income							•
Gain or (loss) from sales of assets other			+				
than inventory		i					<481
•						<u> </u>	
Net income or (loss) from special events							
Gross profit or (loss) from sales of inventory	-						
Other revenue							
ā			+		· · · · · · · · · · · · · · · · · · ·	-	
b				<del></del>			
C	_						
d	_						
e	_		<del>.    </del>		20.0		z 4 O 1
Subtotal Add columns (b), (d), and (e)	L	<u> </u>	0.		396		<481
3 Total. Add line 12, columns (b), (d), and (e)				-	13		<85
see worksheet in line 13 instructions to verify calculations	:)						
Part XVI-B Relationship of Activitie	s to the Acc	omplishment of	Exempt	t Purpose	s		
ine No. Explain below how each activity for which i	•			uted importan	tly to the acc	omplishment o	ıf
▼ the foundation's exempt purposes (other the							
INCOME FROM TEMPORARY	INVESTM	ENT OF DONA	ATED	FUNDS.	SAID	INCOME	IS USE
FOR EXEMPT PURPOSE.							
			<del></del>				
							-
						-	

	art and the second second	AN NALE F				37-121			ge 13
Part 2	<del></del>		sfers To a	nd Transactions a	nd Relat	ionships With Noncha	ıritable	В	
	Exempt Organ						<del></del> _	1.0	
	the organization directly or indi			•		ın section 501(c) of		Yes	No
	Code (other than section 501(c			· · · · · · · · · · · · · · · · · · ·	izations?		İ		
	nsfers from the reporting found	ation to a noncharital	bie exempt org	anization of					
	Cash						1a(1)		X
(2)	Other assets						1a(2)	ļ	X
b Oth	er transactions								
(1)	Sales of assets to a noncharita	ible exempt organizat	tion				1b(1)	L	X
(2)	Purchases of assets from a no	ncharitable exempt o	rganization				1b(2)		X
(3)	Rental of facilities, equipment,	or other assets					1b(3)	<u> </u>	Х
(4)	Reimbursement arrangements	i					1b(4)	<u> </u>	_X_
(5)	Loans or loan guarantees						1b(5)		<u>X</u>
(6)	Performance of services or me	embership or fundrais	sıng solicitatioi	ns			1b(6)		X
c Sha	aring of facilities, equipment, ma	uling lists, other asse	ts, or paid emp	oloyees			16	<u> </u>	X
d Ifti	ne answer to any of the above is	"Yes," complete the f	following sched	dule Column (b) should alv	ways show th	e fair market value of the goods,	other as:	sets,	
ors	services given by the reporting f	oundation If the four	ndation receive	d less than fair market valu	ie in any tran	saction or sharing arrangement,	show in		
col	umn (d) the value of the goods,	other assets, or serv	ices received						
(a) ⊔ле п	o (b) Amount involved	(c) Name of		exempt organization	(d) De	scription of transfers, transactions, and	shanng ar	rangeme	nts
		<u> </u>	N/A						
						· · · ·			
	<u></u>								
		<u> </u>							
		<u> </u>							
	. l								
2a ls 1	he foundation directly or indirec	ctly affiliated with, or i	related to, one	or more tax-exempt organi	zations desc	ribed			
in s	section 501(c) of the Code (othe	er than section 501(c)	)(3)) or in secti	ion 527?			Yes	X	No
b_lf "	Yes," complete the following sch	redule							
	(a) Name of or	ganization		(b) Type of organization		(c) Description of relation	ship		
	N/A								
			_						
		·· <del></del> ···							
	,								
	Under penalties of penjury, I declare and belief, It is true, correct, and co	that I have examined the	s return, including	g accompanying schedules and	statements, ar	nd to the best of my knowledge	ay the IRS	discuss	this
Sign	A	mpieto boolalation of pr	cparer (outer than	r taxpayer) is based on all lilloni		proparer rias any knowledge	tum with the	ne prepai	rer
Here	P MAINEUT			11/14/15	Pre	rident i	X Yes		No
	Signature of officer or truster	e		Date	Title				
	Print/Type preparer's n	ame	Preparer's si	gnature	Date	Check X If PTIN			
			7,	0 111		self- employed			
Paid			Lames	y. Helpenny	11-4-1	P(	1382	375	
Prep	1	DMAS J. HA	LPENNY	,VC.P.Ā. √		Firm's EIN ▶			
Use (				·					
				LEVARD, SUIT	E H				
	L <i>I</i>	A CANADA,	CA 910	11		Phone no.			

423622 11-24-14 Form 990-PF (2014)

### 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 <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>

2014

OMB No 1545-0047

Name of the organization

Employer identification number

W	ILLIAM MALE FOUNDATION	57-1217948
Organization type (check	··· · · · · · · · · · · · · · · · · ·	
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	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	n is covered by the <b>General Rule</b> or a <b>Special Rule.</b> (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ile. See instructions.
General Rule		
	ion filing Form 990, 990·EZ, or 990·PF that received, during the year, contributions totaling ny one contributor. Complete Parts I and II. See instructions for determining a contributor	
Special Rules		
sections 509(a)( any one contribu	tion 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, utor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount EZ, line 1. Complete Parts I and II.	, or 16b, and that received from
year, total contri	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from abutions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educate for the complete Parts I, II, and III.	
year, contributio is checked, ente purpose. Do not	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from one exclusively for religious, charitable, etc., purposes, but no such contributions totaled met here the total contributions that were received during the year for an exclusively religious complete any of the parts unless the <b>General Rule</b> applies to this organization because in the parts unless to the parts unless the <b>General Rule</b> applies to this organization because in the parts unless to the parts unless the <b>General Rule</b> applies to this organization because in the parts unless the <b>General Rule</b> applies to this organization because in the parts unless the <b>General Rule</b> applies to the <b></b>	ore than \$1,000. If this box s, charttable, etc.,
but it must answer "No" o	n that is not covered by the General Rule and/or the Special Rules does not file Schedule I on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its F eet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

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

# WILLIAM MALE FOUNDATION

57-1217948

Part I	Contributors (see instructions). Use duplicate copies of Part I	f additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	WILLIAM MALE P.O. BOX 232536 ENCINITAS, CA 92023	\$\$.	Person Payroli Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person 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
423452 11.0		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

**Employer identification number** 

57\_1217948

(b)	(c)	******
Description of noncash property given	FMV (or estimate) (see instructions)	(d) Date received
PUBLICLY TRADED SECURITIES		
	<u> </u>	12/23/14
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	<b>*</b>	
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	<b>\$</b>	
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	s	
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	(b) Description of noncash property given   (b) Description of noncash property given  (c) FMV (or estimate) (see instructions)  (b) Description of noncash property given  (c) FMV (or estimate) (see instructions)  (d) FMV (or estimate) (see instructions)  (e) FMV (or estimate) (see instructions)  (f) FMV (or estimate) (see instructions)  (h) Description of noncash property given  (c) FMV (or estimate) (see instructions)  (d) FMV (or estimate) (see instructions)	

Name of organ	nization		Employer identification number		
WILLIA	M MALE FOUNDATION		57-1217948		
Part III	Exclusively religious, charitable, etc., contri the year from any one contributor. Complete co completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	lumns (a) through (e) and the follow chantable, etc., contributions of \$1,000 or	n section 501(c)(7), (8), or (10) that total more than \$1,000 for ring line entry. For organizations		
(a) No. from		•	(a) Description of how sift is held		
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	1 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		
-	Transferee's name, address, and	(e) Transfer of gift	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	d 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 ZIP + 4		Relationship of transferor to transferee		

FORM 990-PF DIVIDENI	S AND INTER	EST FROM SECUR	ITIES ST	TATEMENT 1	
GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	
CHARLES SCHWAB & COMPANY 396	5.	0. 396.	396.	396.	
TO PART I, LINE 4	5.	396.	396.	396.	
FORM 990-PF	LEGAL	FEES	ST	PATEMENT 2	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
LEGAL FEES	4,660.	0.	0.	4,660.	
TO FM 990-PF, PG 1, LN 16A =	4,660.		0.	4,660.	
FORM 990-PF	ACCOUNTI	NG FEES	rs	TATEMENT 3	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
DESCRIPTION ————————————————————————————————————	EXPENSES	NET INVEST-	ADJUSTED	CHARITABLE	
	EXPENSES PER BOOKS	NET INVEST- MENT INCOME	ADJUSTED NET INCOME	CHARITABLE PURPOSES	
ACCOUNTING FEES	EXPENSES PER BOOKS 1,895.	NET INVEST- MENT INCOME  0.  0.	ADJUSTED NET INCOME  0.	CHARITABLE PURPOSES 1,895.	
ACCOUNTING FEES TO FORM 990-PF, PG 1, LN 16B	EXPENSES PER BOOKS 1,895.	NET INVEST- MENT INCOME  0.  0.	ADJUSTED NET INCOME  0.	CHARITABLE PURPOSES  1,895.	
ACCOUNTING FEES  TO FORM 990-PF, PG 1, LN 16B  FORM 990-PF	EXPENSES PER BOOKS  1,895.  1,895.  TAX  (A) EXPENSES	NET INVEST- MENT INCOME  0.  0.  (B) NET INVEST- MENT INCOME  0.	ADJUSTED NET INCOME  0.  0.  ST  (C) ADJUSTED	CHARITABLE PURPOSES  1,895.  1,895.  CATEMENT 4  (D)  CHARITABLE	

FORM 990-PF	CORPORATE STOCK		STATEMENT	5
DESCRIPTION		BOOK VALUE	FAIR MARKET	Г
SECURITIES		31,248.	30,0	73.
TOTAL TO FORM 990-PF, PAR	T II, LINE 10B	31,248.	30,0	73.
FORM 990-PF	OTHER LIABILITIES		STATEMENT	6
DESCRIPTION		BOY AMOUNT	EOY AMOUNT	
TEMPORARY BANK OVERDRAFT		2,403.	1,00	51.
TOTAL TO FORM 990-PF, PAR	T II, LINE 22	2,403.	1,00	51.
FORM 990-PF LIS	T OF SUBSTANTIAL CONTRIB PART VII-A, LINE 10	BUTORS	STATEMENT	7
NAME OF CONTRIBUTOR	ADDRESS		4	
WILLIAM MALE	P.O. BOX 2325	536		

ENCINITAS, CA 92023

	II - LIST OF OFFICERS, DIRECTORS TEES AND FOUNDATION MANAGERS			STATEMENT 8	
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE	
WILLIAM MALE P.O. BOX 232536 ENCINITAS, CA 92023	PRESIDENT, DIR	ECTOR 0.	0.	0.	
MYLINH UY-ARNETT 9925 OSGOOD WAY SAN DIEGO, CA 92126	V-P, DIRECTOR 1.00	0.	0.	0.	
CHRISTOPHER MADSEN 1574 LOMA ALTA DRIVE SAN MARCOS, CA 92069	TREASURER, DIR	ECTOR 0.	0.	0.	
JASON BENITEZ 16720 PRARIE FAWN CT. SAN DIEGO, CA 92127	SECRETARY, DIR 1.00	ECTOR 0.	0.	0.	
JEFF ARCIO 4922 MT. ANTERO DR. SAN DIEGO, CA 92111	DIRECTOR 1.00	0.	0.	0.	
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.	