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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

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Information about Form 990-PF and its instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

OMB No 1545-0052

2014

Open to Public Inspection

For calendar year 2014, or tax year beginning 01-01-2014, and ending 12-31-2014

Name of foundation THE GAMBLE FOUNDATION		<b>A Employer identification number</b>  94-1680503	
Number and street (or P O box number if mail is not delivered to street address) PO BOX 2655		<b>B Telephone number</b> (see instructions)  (415) 782-8100	
City or town, state or province, country, and ZIP or foreign postal code SAN FRANCISCO, CA 94126		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>	
<b>G</b> Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
<b>H</b> Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) <input checked="" type="checkbox"/> \$ 21,560,588		<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
<b>J</b> Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule) . . . . .	256,330			
	2 Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities. . . . .	597,109	597,109	597,109	
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	16,445			
	b Gross sales price for all assets on line 6a 905,048				
	7 Capital gain net income (from Part IV, line 2) . . .		16,445		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .				
	12 <b>Total.</b> Add lines 1 through 11 . . . . .	869,884	613,554	597,109	
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0	0	0	0
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .				
	b Accounting fees (attach schedule) . . . . .	2,900	2,900	0	0
	c Other professional fees (attach schedule) . . . . .				
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . .	10,641	331	0	0
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	126,849	36,100	0	90,749
	24 <b>Total operating and administrative expenses.</b>				
	Add lines 13 through 23 . . . . .	140,390	39,331	0	90,749
	25 Contributions, gifts, grants paid . . . . .	948,400			948,400
	26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	1,088,790	39,331	0	1,039,149
	27 Subtract line 26 from line 12				
	a <b>Excess of revenue over expenses and disbursements</b>	-218,906			
	b <b>Net investment income</b> (if negative, enter -0-)		574,223		
	c <b>Adjusted net income</b> (if negative, enter -0-)			597,109	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing . . . . .	97,282	155,168	155,168
	2	Savings and temporary cash investments . . . . .	518,248	358,262	358,262
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) . . . . .	4,680,057	4,753,356	19,429,783
	c	Investments—corporate bonds (attach schedule). . . . .	1,683,438	1,493,333	1,617,375
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans . . . . .			
	13	Investments—other (attach schedule) . . . . .			
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	6,979,025	6,760,119	21,560,588	
Liabilities	17	Accounts payable and accrued expenses . . . . .			
	18	Grants payable . . . . .			
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule) . . . . .			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities (add lines 17 through 22) . . . . .	0	0	
	Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
24		Unrestricted . . . . .			
25		Temporarily restricted . . . . .			
26		Permanently restricted . . . . .			
Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.					
27		Capital stock, trust principal, or current funds . . . . .	3,574,668	3,574,668	
28		Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
29		Retained earnings, accumulated income, endowment, or other funds	3,404,357	3,185,451	
30		Total net assets or fund balances (see instructions) . . . . .	6,979,025	6,760,119	
31		Total liabilities and net assets/fund balances (see instructions) . . .	6,979,025	6,760,119	

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 6,979,025
2	Enter amount from Part I, line 27a . . . . .	2 -218,906
3	Other increases not included in line 2 (itemize) ▶ _____	3 0
4	Add lines 1, 2, and 3 . . . . .	4 6,760,119
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 6,760,119

Part IV

Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a	See Additional Data Table			
b				
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	See Additional Data Table		
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a	See Additional Data Table		
b			
c			
d			
e			

2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	16,445
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)  If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 . . . . .	}	3	462

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2013	755,696	18,731,670	0 040343
2012	399,979	15,949,616	0 025078
2011	440,000	15,001,469	0 029330
2010	1,150,402	13,925,930	0 082609
2009	695,810	11,835,938	0 058788

2	Total of line 1, column (d). . . . .	2	0 236148
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years . . . . .	3	0 047230
4	Enter the net value of noncharitable-use assets for 2014 from Part X, line 5. . . . .	4	20,248,285
5	Multiply line 4 by line 3. . . . .	5	956,327
6	Enter 1% of net investment income (1% of Part I, line 27b). . . . .	6	5,742
7	Add lines 5 and 6. . . . .	7	962,069
8	Enter qualifying distributions from Part XII, line 4. . . . .	8	1,039,149

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

Part VIExcise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

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)

1

Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☒ and enter 1% of Part I, line 27b

2

All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)

2

Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)

3

Add lines 1 and 2.

4

Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)

5

Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-

6

Credits/Payments

a

2014 estimated tax payments and 2013 overpayment credited to 2014

6a

10,791

b

Exempt foreign organizations—tax withheld at source

6b

c

Tax paid with application for extension of time to file (Form 8868)

6c

d

Backup withholding erroneously withheld

6d

7

Total credits and payments Add lines 6a through 6d.

8

Enter any penalty for underpayment of estimated tax Check here ☐ if Form 2220 is attached

9

Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed

10

Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.

11

Enter the amount of line 10 to be Credited to 2015 estimated tax 5,049 Refunded

1

5,742

0

5,742

0

5,742

10,791

5,049

0

Part VII-AStatements 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 any political campaign?

1a

No

1b

Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)?

1b

No

1c

Did the foundation file Form 1120-POL for this year?

1c

No

2

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

2

No

3

Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ 0

3

No

4

Has the foundation engaged in any activities that have not previously been reported to the IRS?

4

No

5

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

5

No

6

Did the foundation have unrelated business gross income of \$1,000 or more during the year?

6

No

7

If "Yes," has it filed a tax return on Form 990-T for this year?

7

8

Was there a liquidation, termination, dissolution, or substantial contraction during the year?

8

No

9

If "Yes," attach the statement required by General Instruction T.

9

10

Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either

10

11

By language in the governing instrument, or

11

12

By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?

12

Yes

13

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.

13

Yes

14

Enter the states to which the foundation reports or with which it is registered (see instructions)

14

CA

15

If the answer is "Yes" to line 13, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation

15

Yes

16

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)?

16

No

17

If "Yes," complete Part XIV

17

18

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses.

18

No

Form 990-PF (2014)

Part VII-A

Statements Regarding Activities *(continued)*

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
Website address N/A				
14	The books are in care of GAMBLE PARTNERS LLC Telephone no (415) 782-8102 Located at PO BOX 2655 SAN FRANCISCO CA ZIP+4 94126			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the year.	15		
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country				

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes No (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days ). Yes No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here.	1b		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014? If "Yes," list the years 20 , 20 , 20 , 20 Yes No			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions ).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes No			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions).	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?	5b		
	Organizations relying on a current notice regarding disaster assistance check here.	<input checked="" type="checkbox"/>		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	If "Yes," attach the statement required by Regulations section 53.4945–5(d).			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		No
	If "Yes" to 6b, file Form 8870.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	7b		

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				0

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "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 IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 NONE	0
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	0
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3. . . . .	0



Part X

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities. . . . .	1a	20,443,361
b	Average of monthly cash balances. . . . .	1b	113,274
c	Fair market value of all other assets (see instructions). . . . .	1c	0
d	Total (add lines 1a, b, and c). . . . .	1d	20,556,635
e	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	20,556,635
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	4	308,350
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	20,248,285
6	Minimum investment return. Enter 5% of line 5. . . . .	6	1,012,414

Part XI

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6. . . . .	1	1,012,414
2a	Tax on investment income for 2014 from Part VI, line 5. . . . .	2a	5,742
b	Income tax for 2014 (This does not include the tax from Part VI ). . . . .	2b	
c	Add lines 2a and 2b. . . . .	2c	5,742
3	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	3	1,006,672
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	0
5	Add lines 3 and 4. . . . .	5	1,006,672
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	1,006,672

Part XII

Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	1a	1,039,149
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, 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 Part XIII, line 4	4	1,039,149
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 (see instructions). . . . .	5	5,742
6	Adjusted qualifying distributions. Subtract line 5 from line 4. . . . .	6	1,033,407
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years			

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				1,006,672
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only. . . . .			3,248	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2014				
a From 2009. . . . .				
b From 2010. . . . .				
c From 2011. . . . .				
d From 2012. . . . .				
e From 2013. . . . .				
f Total of lines 3a through e. . . . .	0			
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ 1,039,149				
a Applied to 2013, but not more than line 2a			3,248	
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. . . . .				1,006,672
e Remaining amount distributed out of corpus	29,229			
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	29,229			
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 instructions . . . . .			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). . . . .	0			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions). . . .	0			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a . . . . .	29,229			
10 Analysis of line 9				
a Excess from 2010. . . .				
b Excess from 2011. . . .				
c Excess from 2012. . . .				
d Excess from 2013. . . .				
e Excess from 2014. . . .	29,229			

Part XIV

Private Operating Foundations (see instructions and Part VII-A, question 9)

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling. . . . .

b

Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

☐ 4942(j)(3) or ☐ 4942(j)(5)

2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .	Tax year	Prior 3 years			(e) Total
		(a) 2014	(b) 2013	(c) 2012	(d) 2011	
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 . . . . .					
	(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 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					

Part XV

Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1

Information Regarding Foundation Managers:

a

List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

See Additional Data Table

b

List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a

The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

MARY GREGORY PFS  
1660 BUSH STREET SUITE 300  
SAN FRANCISCO, CA 94109  
(415) 561-6540

b

The form in which applications should be submitted and information and materials they should include

LETTER OF REQUEST

c

Any submission deadlines

NO

d

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

CHARITABLE ORGANIZATIONS

Part XV

Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total . . . . .			3a	948,400
b Approved for future payment				
Total . . . . .			3b	0

Enter gross amounts unless otherwise indicated

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2014)

Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

<b>(1)</b> Cash. . . . .	<b>1a(1)</b>		<b>No</b>
<b>(2)</b> Other assets. . . . .	<b>1a(2)</b>		<b>No</b>
<b>b</b> Other transactions			
<b>(1)</b> Sales of assets to a noncharitable exempt organization. . . . .	<b>1b(1)</b>		<b>No</b>
<b>(2)</b> Purchases of assets from a noncharitable exempt organization. . . . .	<b>1b(2)</b>		<b>No</b>
<b>(3)</b> Rental of facilities, equipment, or other assets. . . . .	<b>1b(3)</b>		<b>No</b>
<b>(4)</b> Reimbursement arrangements. . . . .	<b>1b(4)</b>		<b>No</b>
<b>(5)</b> Loans or loan guarantees. . . . .	<b>1b(5)</b>		<b>No</b>
<b>(6)</b> Performance of services or membership or fundraising solicitations. . . . .	<b>1b(6)</b>		<b>No</b>
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees. . . . .	<b>1c</b>		<b>No</b>

[illegible]

**b** If "Yes," complete the following schedule

[illegible]

\*\*\*\*\* 2015-05-07 \*\*\*\*\*

Signature of officer or trustee Date Title

May the IRS discuss this return with the preparer shown below (see instr )? ☐ Yes ☐ No

<b>Paid Preparer Use Only</b>	Print/Type preparer's name MARK O BRITTAIN CPA	Preparer's Signature	Date	Check if self-employed <input checked="" type="checkbox"/>	PTIN P00285075
	Firm's name <input checked="" type="checkbox"/> LINDQUIST VON HUSEN & JOYCE LLP			Firm's EIN <input checked="" type="checkbox"/> 94-1250261	
	Firm's address <input checked="" type="checkbox"/> 90 NEW MONTGOMERY STREET 11TH FLOOR SAN FRANCISCO, CA 94105			Phone no. (415) 957-9999	

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
PARAGON OFFSHORE PLC		2010-07-27	2014-09-02
MORGAN STANLEY 2 875%		2011-12-12	2014-07-28
NOBLE CORP		2010-07-27	2014-08-01
NOBLE CORP		2011-01-21	2014-08-01
ALCOA		2002-02-15	2014-05-07
MARTIN MARIETTA MATERIALS		2011-03-01	2014-05-07
AMGEN INC		2007-10-29	2014-05-07
EXPEDITORS INTL		2008-10-15	2014-05-07
HEWLETT PACKARD		2014-09-29	2014-09-29
NOBLE CORP		2010-09-16	2014-08-01

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
49,261		70,763	-21,502
200,000		190,105	9,895
20,146		20,145	1
23,398		23,397	1
66,044		50,872	15,172
122,267		87,647	34,620
112,118		56,148	55,970
41,259		29,960	11,299
84,186		83,724	462
15,116		15,115	1

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-21,502
			9,895
			1
			1
			15,172
			34,620
			55,970
			11,299
			462
			1

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
NOBLE CORP		2011-06-28	2014-08-01
NOBLE CORP		2011-01-21	2014-11-13
NOBLE CORP		2011-06-28	2014-11-13

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
12,107		12,106	1
105,969		163,843	-57,874
53,177		84,778	-31,601

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			1
			-57,874
			-31,601




Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
MARK D GAMBLE	PRESIDENT/TRUSTEE 0 00	0	0	0
PO BOX 2655 SAN FRANCISCO,CA 94126				
AIMEE GAMBLE PRICE	VICE PRES /TRUSTEE 0 00	0	0	0
PO BOX 2655 SAN FRANCISCO,CA 94126				
GREGORY T PRICE	SECRETARY 0 00	0	0	0
PO BOX 2655 SAN FRANCISCO,CA 94126				
PAUL E CAMERON	TREASURER 0 00	0	0	0
PO BOX 2655 SAN FRANCISCO,CA 94126				
LAUNCE L GAMBLE	TRUSTEE 0 00	0	0	0
PO BOX 2655 SAN FRANCISCO,CA 94126				

**Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).**

MARK D GAMBLE
AIMEE GAMBLE PRICE
GREGORY T PRICE
LAUNCE L GAMBLE

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
826 VALENCIA 826 VALENCIA STREET SAN FRANCISCO,CA 94110		PUBLIC CHARITY	GENERAL PURPOSE	25,000
AG 4 YOUTH UPVALLEY RANCHERS 1200 FOSTER ROAD NAPA,CA 94558		PUBLIC CHARITY	GENERAL PURPOSE	25,000
AG4 YOUTH P O BOX 2494 YOUNTVILLE,CA 94599		PUBLIC CHARITY	GENERAL PURPOSE	25,000
AIM HIGH FOR HIGH SCHOOL P O BOX 410715 SAN FRANCISCO,CA 94110		PUBLIC CHARITY	GENERAL PURPOSE	30,000
AMERICAN FDN TIBETAN CULTURAL PRESERVATION 75 S GRAND AVENUE STE 217 PASADENA,CA 91105		PUBLIC CHARITY	GENERAL PURPOSE	15,000
BAYVIEW HUNTERS POINT CENTER ARTS & TECH 2415 THIRD STREET STE 230 SAN FRANCISCO,CA 94107		PUBLIC CHARITY	GENERAL PURPOSE	20,000
BRIDGE THE GAP COLLEGE PREP P O BOX 1390 SAUSALITO,CA 94965		PUBLIC CHARITY	GENERAL PURPOSE	30,000
CALIFORNIA GAME WARDENS FOUNDATION 2180 SAND HILL ROAD STE 100 MENLO PARK,CA 94025		PUBLIC CHARITY	GENERAL PURPOSE	1,000
CALIFORNIA RANGELAND TRUST 1225 H STREET SACRAMENTO,CA 95814		PUBLIC CHARITY	GENERAL PURPOSE	1,000
CALIFORNIA TROUT 360 PINE STREET 4TH FLOOR SAN FRANCISCO,CA 94104		PUBLIC CHARITY	GENERAL PURPOSE	1,000
CALIFORNIA WATERFOWL ASSOCIATION 1346 BLUE OAKS BLVD ROSEVILLE,CA 95678		PUBLIC CHARITY	GENERAL PURPOSE	2,000
CAPELL VALLEY VOLUNTEER FIRE DEPT 1305 CAPELL VALLEY ROAD NAPA,CA 94558		PUBLIC CHARITY	GENERAL PURPOSE	6,000
CEDARS OF MARIN P O BOX 947 ROSS,CA 94957		PUBLIC CHARITY	GENERAL PURPOSE	5,400
CHRIST HOSPITAL FOUNDATION 625 EDEN PARK DRIVE BALDWIN 200 CINCINNATI,OH 45202		PUBLIC CHARITY	GENERAL PURPOSE	5,000
COMMUNITY INITIATIVES 354 PINE STREET STE 700 SAN FRANCISCO,CA 94104		PUBLIC CHARITY	GENERAL PURPOSE	25,000
<b>Total . . . . .</b>  <b>3a</b>				948,400


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
<b>a</b> Paid during the year				
CONNOLLY RANCH EDUCATION CENTER 3141 BROWNS VALLEY ROAD NAPA,CA 94558		PUBLIC CHARITY	GENERAL PURPOSE	6,000
CPMC FOUNDATION 2015 STEINER STREET SAN FRANICSCO,CA 94115		PUBLIC CHARITY	GENERAL PURPOSE	10,000
DISTRICT 10 WILD DUCK EGG SALVAGE 9512 MATTHEWS LANE MARYSVILLE,CA 95901		PUBLIC CHARITY	GENERAL PURPOSE	3,000
EDUCATION OUTSIDE 135 VAN NESS AVENUE RM 408 SAN FRANCISCO,CA 94102		PUBLIC CHARITY	GENERAL PURPOSE	25,000
ENVIRONMENTAL TRAVELING COMPANIONS 2 MARINA BLVD BLDG C SAN FRANCISCO,CA 94123		PUBLIC CHARITY	GENERAL PURPOSE	30,000
GENERATION CITIZENS 156 2ND STREET 2ND FLR SAN FRANCISCO,CA 94105		PUBLIC CHARITY	GENERAL PURPOSE	25,000
GLOBAL STUDENT EMBASSY P O BOX 4566 SEBASTOPOL,CA 95473		PUBLIC CHARITY	GENERAL PURPOSE	25,000
HANDS ACROSS THE VALLEY P O BOX 5404 NAPA,CA 94581		PUBLIC CHARITY	GENERAL PURPOSE	5,000
HOSPITAL ALBERT SCHWEITZER HAITI 2840 LIBERTY AVENUE STE 201 PITTSBURGH,PA 15222		PUBLIC CHARITY	GENERAL PURPOSE	5,000
JAMESON RESCUE RANCH 1224 ADAMS STREET STE C ST HELENA,CA 94574		PUBLIC CHARITY	GENERAL PURPOSE	10,000
LIFE LEARNING ACADEMY 651 8TH STREET TREASURE ISLAND SAN FRANCISCO,CA 94130		PUBLIC CHARITY	GENERAL PURPOSE	30,000
MARIN AGRICULTURAL LAND TRUST P O BOX 809 POINT REYES STATION,CA 94956		PUBLIC CHARITY	GENERAL PURPOSE	17,500
MARIN GENERAL HOSPITAL FOUNDATION 100 B DRAKES LANDING STE 255 GREENBRAE,CA 94904		PUBLIC CHARITY	GENERAL PURPOSE	7,000
MARIN LINK 5800 NORTHGATE MALL STE 250 SAN RAFAEL,CA 94903		PUBLIC CHARITY	GENERAL PURPOSE	20,000
MARIN PRIMARY & MIDDLE SCHOOL 20 MAGNNOLIA AVENUE LARKSPUR,CA 94939		PUBLIC CHARITY	GENERAL PURPOSE	12,000
<b>Total . . . . .</b>  <b>3a</b>				948,400

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
<b>a</b> Paid during the year				
NAPA CITY COUNTY LIBRARY 1195 THIRD STREET NAPA,CA 94559		PUBLIC CHARITY	GENERAL PURPOSE	6,000
NAPA COUNTY AG IN THE CLASSROOM 811 JEFFERSON STREET NAPA,CA 94559		PUBLIC CHARITY	GENERAL PURPOSE	6,000
NAPA COUNTY CHILDREN'S TRUST FUND 1195 THIRD STREET NAPA,CA 94559		PUBLIC CHARITY	GENERAL PURPOSE	6,000
NAPA COUNTY LAND TRUST 1700 SOSCAL AVENUE STE 20 NAPA,CA 94559		PUBLIC CHARITY	GENERAL PURPOSE	6,000
NAPA VALLEY UNIFIED SCHOOL DISTRICT 2425 JEFFERSON STREET NAPA,CA 94558		PUBLIC CHARITY	GENERAL PURPOSE	35,000
NETWORK FOR TEACHING ENTREPRENEURSHIP 120 WALL STREET 18TH FL NEWYORK,NY 10005		PUBLIC CHARITY	GENERAL PURPOSE	30,000
NEW DOOR VENTURES 3221 20TH STREET SAN FRANCISCO,CA 94110		PUBLIC CHARITY	GENERAL PURPOSE	30,000
NOVATO YOUTH CENTER 680 WILSON AVENUE NOVATO,CA 94947		PUBLIC CHARITY	GENERAL PURPOSE	20,000
PAUL ALEXANDER SCHOLARSHIP FOUNDATION P O BOX 670 ST HELENA,CA 94574		PUBLIC CHARITY	GENERAL PURPOSE	6,000
PEPPERWOOD FOUNDATION 2130 PEPPERWOOD PRESERVE ROAD SANTA ROSA,CA 95404		PUBLIC CHARITY	GENERAL PURPOSE	25,000
POINT BLUE CONSERVATION SCIENCE 3820 CYPRESS DRIVE 11 PETALUMA,CA 94954		PUBLIC CHARITY	GENERAL PURPOSE	25,000
POPE VALLEY SCHOLARSHIP FUND P O BOX 23 POPE VALLEY,CA 94567		PUBLIC CHARITY	GENERAL PURPOSE	6,000
POPE VALLEY VOLUNTEER FIRE DEPARTMENT P O BOX 211 POPE VALLEY,CA 94567		PUBLIC CHARITY	GENERAL PURPOSE	6,000
PROJECT AVARY 1623 5TH AVENUE BLDG C SAN RAFAEL,CA 94901		PUBLIC CHARITY	GENERAL PURPOSE	10,000
QUEEN OF THE VALLEY MEDICAL CENTER FOUNDATION 1000 TRANCAS STREET NAPA,CA 94558		PUBLIC CHARITY	GENERAL PURPOSE	7,000
<b>Total . . . . .</b>  <b>3a</b>				948,400

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
<b>a</b> Paid during the year				
SAINT FRANCIS HOSPITAL FOUNDATION 900 HYDE STREET STE 1208 SAN FRANCISCO,CA 94109		PUBLIC CHARITY	GENERAL PURPOSE	7,000
SAN FRANCISCO PARKS ALLIANCE 1663 MISSION STREET STE 320 SAN FRANCISCO,CA 94103		PUBLIC CHARITY	GENERAL PURPOSE	35,000
SAN FRANCISCO SPCA 201 ALABAMA STREET SAN FRANCISCO,CA 94103		PUBLIC CHARITY	GENERAL PURPOSE	500
SEVEN TEPEES YOUTH PROGRAM 3177 17TH STREET SAN FRANCISCO,CA 94110		PUBLIC CHARITY	GENERAL PURPOSE	25,000
SLIDE RANCH 2025 SHORELINE HIGHWAY MUIR BEACH,CA 94965		PUBLIC CHARITY	GENERAL PURPOSE	20,000
SPARK 555 DE HARO STREET STE 330 SAN FRANCISCO,CA 94107		PUBLIC CHARITY	GENERAL PURPOSE	25,000
ST HELENA BOYS & GIRLS CLUB 1420 TAINTER STREET ST HELENA,CA 94574		PUBLIC CHARITY	GENERAL PURPOSE	6,000
ST HELENA HOSPITAL FOUNDATION 10 WOODLAND ROAD ST HELENA,CA 94574		PUBLIC CHARITY	GENERAL PURPOSE	7,000
TEN THOUSAND DEGREES 1650 LOS GAMOS DRIVE STE 110 SAN RAFAEL,CA 94903		PUBLIC CHARITY	GENERAL PURPOSE	40,000
THE BAY SCHOOL OF SAN FRANCISCO 35 KEYES AVENUE SAN FRANCISCO,CA 94129		PUBLIC CHARITY	GENERAL PURPOSE	62,500
THE NEW VILLAGE SCHOOL 100 EBBTIDE AVENUE STE 144 SAUSALITO,CA 94965		PUBLIC CHARITY	GENERAL PURPOSE	5,000
THE THACHER SCHOOL 5025 THACHER ROAD OJAI,CA 93023		PUBLIC CHARITY	GENERAL PURPOSE	10,000
TIDES CENTER P O BOX 29198 SAN FRANCISCO,CA 94129		PUBLIC CHARITY	GENERAL PURPOSE	20,000
UCSF FOUNDATION UCSF BOX 45339 SAN FRANCISCO,CA 94145		PUBLIC CHARITY	GENERAL PURPOSE	12,000
WESTWOOD HISTORICAL SOCIETY P O BOX 11095 CINCINNATI,OH 45211		PUBLIC CHARITY	GENERAL PURPOSE	2,500
<b>Total . . . . .</b>  <b>3a</b>				948,400

<div>Schedule B</div> <div>(Form 990, 990-EZ, or 990-PF)</div> <div>Department of the Treasury Internal Revenue Service</div>	<div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF.</div> <div>▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a>.</div>	<div>OMB No 1545-0047</div> <div>2014</div>
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<div>Name of the organization</div> <div>THE GAMBLE FOUNDATION</div>	<div>Employer identification number</div> <div>94-1680503</div>
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Organization type (check one)

<div>Filers of:</div> <div>Form 990 or 990-EZ</div> <div>Form 990-PF</div>	<div>Section:</div> <div><div><input type="checkbox"/> 501(c)( ) (enter number) organization</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation</div><div><input type="checkbox"/> 527 political organization</div><div><input checked="" type="checkbox"/> 501(c)(3) exempt private foundation</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation</div><div><input type="checkbox"/> 501(c)(3) taxable private foundation</div></div>
--	---

Check if your organization is covered by the **General Rule** or a **Special Rule**.  
**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ 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.
- ☐ 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. . . . . ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer “No” 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 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

<b>Name of organization</b> THE GAMBLE FOUNDATION	<b>Employer identification number</b> 94-1680503
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<b>Part I</b>	<b>Contributors</b> (see Instructions) Use duplicate copies of Part I if additional space is needed		
<b>(a)</b> <b>No.</b>	<b>(b)</b> <b>Name, address, and ZIP + 4</b>	<b>(c)</b> <b>Total contributions</b>	<b>(d)</b> <b>Type of contribution</b>
 ____	See Additional Data Table  _____  _____  _____	  \$ _____	  <b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )
 ____	  _____  _____  _____	  \$ _____	  <b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )
 ____	  _____  _____  _____	  \$ _____	  <b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )
 ____	  _____  _____  _____	  \$ _____	  <b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )
 ____	  _____  _____  _____	  \$ _____	  <b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )
 ____	  _____  _____  _____	  \$ _____	  <b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )
 ____	  _____  _____  _____	  \$ _____	  <b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )



<b>Name of organization</b> THE GAMBLE FOUNDATION	<b>Employer identification number</b> 94-1680503
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<b>Part II</b> <b>Noncash Property</b> (see instructions) Use duplicate copies of Part 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
<u>3</u>	333 SHS HEWLETT PACKARD	<u>\$ 10,888</u>	<u>2014-04-16</u>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>4</u>	867 SHS HEWLETT PACKARD	<u>\$ 27,011</u>	<u>2014-03-19</u>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>5</u>	867 SHS HEWLETT PACKARD	<u>\$ 27,011</u>	<u>2014-03-19</u>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>6</u>	1800 SHS HEWLETT PACKARD	<u>\$ 62,793</u>	<u>2014-09-21</u>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>7</u>	600 SHS HEWLETT PACKARD	<u>\$ 20,931</u>	<u>2014-09-29</u>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u> </u>	<u> </u> <u> </u> <u> </u> <u> </u>	<u> </u> \$ <u> </u>	<u> </u>

<b>Name of organization</b> THE GAMBLE FOUNDATION	<b>Employer identification number</b> 94-1680503
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Part III

**Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor.** Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ \_\_\_\_\_

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
<div></div>		<div></div>	
<div></div>		<div></div>	
<div></div>		<div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
<div></div>		<div></div>	
<div></div>		<div></div>	
<div></div>		<div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
<div></div>		<div></div>	
<div></div>		<div></div>	
<div></div>		<div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
<div></div>		<div></div>	
<div></div>		<div></div>	
<div></div>		<div></div>	

Additional Data

Software ID:

Software Version:

EIN: 94-1680503

Name: THE GAMBLE FOUNDATION

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	<div>AIMEE GAMBLE PRICE</div> <div>PO BOX 2655</div> <div>SAN FRANCISCO, CA 94126</div>	\$ 15,000	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<u>2</u>	<div>GEORGE T GAMBLE</div> <div>PO BOX 209</div> <div>RUTHERFORD, CA 94573</div>	\$ 15,000	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<u>3</u>	<div>AIMEE GAMBLE PRICE</div> <div>PO BOX 2655</div> <div>SAN FRANCISCO, CA 94126</div>	\$ 10,888	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input checked="" type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<u>4</u>	<div>MARK D GAMBLE</div> <div>PO BOX 2655</div> <div>SAN FRANCISCO, CA 94126</div>	\$ 27,011	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input checked="" type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<u>5</u>	<div>LAUNCE L GAMBLE</div> <div>PO BOX 2655</div> <div>SAN FRANCISCO, CA 94126</div>	\$ 27,011	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input checked="" type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<u>6</u>	<div>LAUNCE L GAMBLE</div> <div>PO BOX 2655</div> <div>SAN FRANCISCO, CA 94126</div>	\$ 62,793	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input checked="" type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>7</u>	<div>MARK D GAMBLE</div> <div>PO BOX 2655</div> <div>SAN FRANCISCO, CA 94126</div>	\$ <u>20,931</u>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input checked="" type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<u>8</u>	<div>MSG CHARITABLE TRUST</div> <div>PO BOX 2655</div> <div>SAN FRANCISCO, CA 94126</div>	\$ <u>77,500</u>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<u>9</u>	<div>LAUNCE L GAMBLE</div> <div>PO BOX 2655</div> <div>SAN FRANCISCO, CA 94126</div>	\$ <u>196</u>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>

# TY 2014 Accounting Fees Schedule

**Name:** THE GAMBLE FOUNDATION

**EIN:** 94-1680503

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	2,900	2,900	0	0

**TY 2014 Investments Corporate  
Bonds Schedule****Name:** THE GAMBLE FOUNDATION**EIN:** 94-1680503

<b>Name of Bond</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
UNITED PARCEL SERVICES 8.375%	148,730	197,484
GENERAL ELECTRIC CAP 6.9%	571,063	531,930
GOLDMAN SACHS 6.25%	238,130	277,852
MERRILL LYNCH NTS 6.22%	238,255	284,609
MANULIFE FC SN NT 6.22%	297,155	325,500

**TY 2014 Investments Corporate  
Stock Schedule****Name:** THE GAMBLE FOUNDATION**EIN:** 94-1680503

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
BANK OF NEW YORK MELLON CORP.	532,009	1,008,124
PROCTER & GAMBLE	216,864	12,206,060
MERCK & CO., INC.	279,037	511,110
AMERICAN EXPRESS	118,764	465,200
GENERAL ELECTRIC	330,108	404,320
INTEL	174,628	312,094
MCDONALDS CORP.	102,755	562,200
MICROSOFT	190,468	337,924
WAL-MART STORES	90,970	171,760
HEWLETT PACKARD COMPAQ	178,802	179,261
NOBLE CORP	357,457	207,125
SYSCO CORP	223,419	297,675
ALCOA INC.	214,644	394,750
MARTIN MARIETTA MATERIALS	429,995	606,760
BRISTOL MYERS SQUIBB	204,243	265,635
DICK'S SPORTING GOODS	161,792	173,775
CHARLES SCHWAB	176,681	422,660
APACHE CORPORATION	307,960	250,680
PROGRESSIVE WASTE SOLUTIONS	85,011	120,320
ROBERT HALF INTERNATIONAL	226,934	379,470
TERADATA CORP	150,815	152,880

**TY 2014 Other Expenses Schedule****Name:** THE GAMBLE FOUNDATION**EIN:** 94-1680503

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
GRANT MEETINGS	37,586	0	0	37,586
GRANT SELECTION SERVICES	53,163	0	0	53,163
INVESTMENT MANAGEMENT FEES	15,500	15,500	0	0
ADMINISTRATION SERVICES	20,600	20,600	0	0



**TY 2014 Taxes Schedule****Name:** THE GAMBLE FOUNDATION**EIN:** 94-1680503

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX ON INVESTMENT INCOME	10,300	0	0	0
CA FILING FEE	10	0	0	0
FOREIGN TAX ON DIVIDENDS	331	331	0	0