

EXTENDED TO NOVEMBER 15, 2018 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.
 ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

For calendar year 2017 o	tax year beginning		, and ending		
Name of foundation				A Employer identificatio	n number
	1				
THE SAMUELI FOUN	DATION		33-0758237		
Number and street (or P O bo	x number if mail is not delivered to stre	et address)	Room/suite	<b>B</b> Telephone number	
2101 E. COAST HI			β00	949-760-4300	
•	rince, country, and ZIP or foreign	postal code		C If exemption application is i	pending, check here
CORONA DEL MAR,					
G Check all that apply.	Initial return	<del></del>	ormer public charity	D 1. Foreign organization	s, check here
	Final return	Amended return		Foreign organizations m check here and attach c	eeting the 85% test,
	Address change	Name change		check here and attach c	omputation
H Check type of organiza	· · ·	exempt private foundation		E If private foundation sta	
Fair market value of all a	nonexempt charitable trust	Other taxable private foundating method: X Cash	Accrual	under section 507(b)(1	
(from Part II, col. (c), lin	· 1 —	Other (specify)	L Accidal	F If the foundation is in a under section 507(b)(1	
\$		ımn (d) must be on cash bası	s.)	under section 507 (b)(1	/(b), check here
	venue and Expenses nts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
(The total of amounecessarily equal	nts in columns (b), (c), and (d) may not the amounts in column (a) )	expenses per books	income	income	for charitable purposes (cash basis only)
	ifts, grants, etc., received	1,948,500.		N/A	1
2 Check ▶ ☐ if	the foundation is not required to attach Sch. B				
3 Interest on savings cash investments	and temporary	48.	48.		SEE STATEMENT 1
4 Dividends and in	iterest from securities				[
5a Gross rents				-	
<b>b</b> Net rental income of	or (loss)				
6a Net gain or (loss) fr	om sale of assets not on line	-3,237.	· · · · · · · · · · · · · · · · · · ·		SEE STATEMENT 2
b Gross sales price for assets on line 6a	325,893.				
ا 🚜 ا	ome (from Part IV, line 2)		229,575.		
8 Net snort-term t	, •				
9 Income modifica Gross sales less re				B501	<del>                                      </del>
10a and allowances  b Less Cost of good	ld		• • • • • • • • • • • • • • • • • • • •	-	
c Gross profit or (				<u>जिं</u>	m
11 Other income	,		· · · · · · · ·		$\Omega$
12 Total. Add lines	1 through 11	1,945,311.	229,623.	4   5	
13 Compensation of c	fficers, directors, trustees, etc	96,786.	0.	21	77,429.
14 Other employee	salaries and wages	185,560.	0.	C S	148,448.
15 Pension plans, e	mployee benefits	26,348.	0.		21,078.
16a Legal fees  b Accounting fees	STMT 3	6,746.	1,687.	IBS-OSC	2,698.
<b>b</b> Accounting fees		6,500.	1,625.		2,600.
c Other profession	nal fees STMT 5	173,923.	4,800.		161,923.
17 Interest 18 Taxes 19 Depreciation and 20 Occupancy 21 Travel, conferen 22 Printing and pul	amer c	27.622			12.550
18 Taxes	STMT 6	27,602. 2,522.	0.		17,559.
19 Depreciation and	a depietion	2,322.			
20 Occupancy 21 Travel, conferen	ces, and meetings	133,340.	0.		108,085.
22 Printing and put		200,020.			
23 Other expenses	STMT 7	29,266,	0.	·	11,350.
23 Other expenses 24 Total operating expenses. Add	and administrative				
expenses. Add	lines 13 through 23	688,593.	8,112.		551,170.
25 Contributions, g	ifts, grants paid	974,700.			974,700.
26 Total expenses	and disbursements.				
Add lines 24 and	1 25	1,663,293.	8,112.		1,525,870.
27 Subtract line 26	from line 12.				
	over expenses and disbursements	282,018.		<u> </u>	<del> </del>
	income (if negative, enter -0-)		221,511.	N7 / 3	<del> </del>
	come (if negative, enter -0-) or Paperwork Reduction Act Not	ica saa instructions	· · · · · · · · · · · · · · · · · · ·	N/A	Form <b>990-PF</b> (2017)

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions.

1271

Г	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	
<u> </u>	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	34,348.		
		Savings and temporary cash investments	10.	129,428.	129,428.
-		Accounts receivable ▶		ſ	,
		Less; allowance for doubtful accounts		·	
	4	Pledges receivable			
	7	Less: allowance for doubtful accounts			
	_				
		Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable		·	
		Less; allowance for doubtful accounts ▶ ,			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ä	10a	Investments - U.S. and state government obligations			
	ь	Investments - corporate stock			-
		Investments - corporate bonds			
		Investments - land, buildings, and equipment basis			
	• •				
	10	Less accumulated depreciation		·	· · · · · · · · · · · · · · · · · · ·
		Investments - mortgage loans			
	13				
	14	Land, buildings, and equipment; basis 66, 221.		4.550	
		Less accumulated depreciation STMT 8 61,669.	5,804.	4,552.	4,552.
		Other assets (describe OTHER RECEIVABLE )	10,000.	0,	0.
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	50,162.	133,980.	133,980.
	17	Accounts payable and accrued expenses			1
	18	Grants payable			<b> </b>
ģ	19	Deferred revenue			
Liabilites	20	Loans from officers, directors, trustees, and other disqualified persons			}
졅		Mortgages and other notes payable			-
Ë		Other liabilities (describe  SEE STATEMENT 9 )	200,000.	1,800.	1
			,		
	22	Total liabilities (add lines 17 through 22)	200,000.	1,800.	
	20	Foundations that follow SFAS 117, check here		- '	1
		·			}
Ş	١.,	and complete lines 24 through 26, and lines 30 and 31			1
ances		Unrestricted			
		Temporarily restricted			1
Ö	26	Permanently restricted			į
Net Assets or Fund Ba		Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
S	27	Capital stock, trust principal, or current funds	0.	0.	<b>\</b>
se	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	-149,838.	132,180.	
ě	30	Total net assets or fund balances	-149,838.	132,180.	{
_	l	Ţ		<u>.                                      </u>	į
	31	Total liabilities and net assets/fund balances	50,162.	133,980.	
ᇛ	art	III Analysis of Changes in Net Assets or Fund Ba	alances		
_		<u></u>		<del></del>	
		net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
	•	st agree with end-of-year figure reported on prior year's return)		1	-149,838.
2	Ente	r amount from Part I, line 27a		2	282,018.
		r increases not included in line 2 (itemize)		3	0.
4	Add	lines 1, 2, and 3		4	132,180.
		eases not included in line 2 (itemize)		5	0.
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	umn (b), line 30	. 6	132,180.
					Form <b>990-PF</b> (2017)

723511 01-03-18

Page 3

(a) List and describe	the kind(s) of property sold (for exrehouse; or common stock, 200 s	xample, real esta		`P-	ow acquired Purchase Donation	(c) Date acqu (mo., day, y	ured /r.)	(d) Date sold (mo., day, yr.)
1a 11000 SHS LAREDO				<u> </u>	D	03/06/17	0:	3/07/17
b 1650 SHS TRITON					D	11/21/17	1:	1/27/17
c 5880 SHS ANTERO RESOURCES CORP				מ	12/05/17	1:	2/06/17	
d								
e	· · · · · · · · · · · · · · · · · · ·							
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Gain o ((e) plus (f)		
a 154,136.			61,4	90.				92,646
b 65,463.			21,6	33.				43,830
c 106,294.			13,1	.95.				93,099
d								
e			<u></u>					
Complete only for assets showing	ig gain in column (h) and owned b	y the foundation	on 12/31/69.			(I) Gains (Col. (		
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any			ol. (k), but not le Losses (fror		,
a								92,646
Ь								43,830
C								93,099
d								
e								
Capital gain net income or (net ca	pital loss) If gain, also en	ter in Part I, line -0- in Part I, line	7 7	}[	2			229,575
Net short-term capital gain or (los	•			ί[				
If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8				}	3		N/A	
Part V   Qualification U	nder Section 4940(e) for	or Reduced	Tax on Net	Inve	stment In	come		
/as the foundation liable for the sec "Yes," the foundation doesn't qualif Enter the appropriate amount in	y under section 4940(e). Do not c	omplete this par	t.	ntries.				Yes X No
(a) Base period years Calendar year (or tax year beginni	ng in) Adjusted qualifying o	distributions	Net value of no	(c) ncharit	able-use asset	s (col.	(d) Distributio (b) divided)	n ratio by col (c))
2016		906,809.			354,9			2,55458
2015		870,175.			383,3		·	2,26964
2014		896,190.			269,2			3,32834
2013		1,380,881.			217,0			6.36139
2012		1,108,871.			396,6	97.		2,79525
Total of line 1, column (d)						2		17.30923
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years				3		3.46184		
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5			4		166,873			
5 Multiply line 4 by line 3				5		577,689		
6 Enter 1% of net investment income (1% of Part I, line 27b)			6		2,215			
Add lines 5 and 6						7		579,904
	a Dark VIII. Iva - 4							**
B Enter qualifying distributions from If line 8 is equal to or greater than See the Part VI instructions.	n Part XII, line 4 i line 7, check the box in Part VI, li	ne 1b, and comp	olete that part using	g a 1%	tax rate.	8	. <u>-</u> .	1,525,870
ooo mo i ait vi manutillia.							Form	

	Excise tax based on investment income (section 4540(a), 4540(b), 4540(c), of 4540 - 3cc			,	
18	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%		2,	,215.	
	of Part I, line 27b				
	: 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-)			0.	
3	Add lines 1 and 2		2,	215.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0.	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		2,	215.	
6	Credits/Payments:				
	a 2017 estimated tax payments and 2016 overpayment credited to 2017 6a 3,750.			l	
- 1	Exempt foreign organizations - tax withheld at source 6b 0.			1	
(	: Tax paid with application for extension of time to file (Form 8868)  6c  0.			•	
	Backup withholding erroneously withheld 6d 0.				
7	Total credits and payments. Add lines 6a through 6d		3 ,	750.	
8	Enter any penalty for underpayment of estimated tax. Check here x if Form 2220 is attached			0.	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		1,	535.	
11	Enter the amount of line 10 to be; Credited to 2018 estimated tax			0.	
Ρί	art VII-A   Statements Regarding Activities				
1:	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No	
	any political campaign?	1a		х	
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		х	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or				
	distributed by the foundation in connection with the activities.	1			
,	Did the foundation file Form 1120-POL for this year?	1c		X	
	f 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.				
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers. ▶ \$ 0.				
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	ı — I	x	
4	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		х	
	b If "Yes," has it filed a tax return on Form 990-T for this year?	4b			
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		х	
-	If "Yes," attach the statement required by General Instruction 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 law				
	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 XV	7	х		
•	and the second	$\vdash$			
8	a Enter the states to which the foundation reports or with which it is registered. See instructions.				
,	CA				
	of the answer is "Yes" to line 7, 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	8b	<u></u>		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar		$\neg \neg$		1
•	is the recognition of the residence of t	1	4	4 4	

year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresse:

Form	990-PF (2017) THE SAMUELI FOUNDATION 33-07582	37		Page 5
Pa	rt VII-A   Statements Regarding Activities (continued)			
			Yes	No
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		x
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	<u> </u>	†	
12	If "Yes," attach statement, See instructions	12		x
12	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	х	$\vdash$
	Website address Www.Samueli.org			
14	The books are in care of ► MICHAEL SCHULMAN  Telephone no. ►949-760	-4300		
'7	Located at 2101 E. COAST HIGHWAY, SUITE 300, CORONA DEL MAR, CA ZIP+4 >9		941	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		•	$\Box$
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			1
	foreign country >			
Pa	art 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	a 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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		1	
	a disqualified person? X Yes No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?    X Yes  No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?   X 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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			l i
	ıf 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.)			1 1
t	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		.	لــــا
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	<b> </b>	Х
	Organizations relying on a current notice regarding disaster assistance, check here			
(	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 2017?	10	₩	Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			l
	defined in section 4942(j)(3) or 4942(j)(5)):			
á	a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2017?			
	If "Yes," list the years \( \sum_{\text{inst}} \), \( \text{inst} \) 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	2b	·	
	statement - see instructions.)  If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	120	<del>                                     </del>	
,	the provisions of section 4342(a)(2) are being applied to any of the years listed in 2a, list the years here.			
3:	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
•	during the year? Yes X No			
	b If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after	1		
•	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 2017.)	3b	·	١'
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	1	Х
	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 2017?	4b		х

Part VII-B   Statements Regarding Activities for Which F	- Onli 4/20 Way be r	required (contin	T I	IV.	s No	
5a During the year, did the foundation pay or incur any amount to:	1045(a)\2		es X No	<del></del>	3 110	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  Yes X No  Yes X No  Yes X No						
• • • • • • • • • • • • • • • • • • • •	ir to carry on, unectily or mulic		es X No			
any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes'	2		es X No			
(4) Provide a grant to an organization other than a charitable, etc., organization described in section						
——————————————————————————————————————						
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  Yes X No						
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	•	ii negulations	N/A		-	
section 53.4945 or in a current notice regarding disaster assistance? See instru		•		<del>"</del>	<del>- </del> -	
Organizations relying on a current notice regarding disaster assistance, check h		nad				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr			🗀 "		1 1	
expenditure responsibility for the grant?	N	/A 10	es LII No			
If "Yes," attach the statement required by Regulations section 53.4945-5(d).					1 1	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		es X No		1	
a personal benefit contract?			es 🚣 NO  .		-  <del>-</del>	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal denetit contract?			00	<del>  ^-</del> ,	
If "Yes" to 6b, file Form 8870.	1		es X No		1 1	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y(	-	75	+	
b If "Yes," did the foundation receive any proceeds or have any net income attributed in the foundation About Officers, Directors, Trust		nagara Highl	N/A	7b		
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	magers, migni	y			
List all officers, directors, trustees, and foundation managers and t	heir compensation.			-		
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) (	xpense	
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	ačcó: allo	expense unt, other wances	
SUSAN SAMUELI	PRESIDENT					
2101 E. COAST HIGHWAY, SUITE 300						
CORONA DEL MAR, CA 92625-1941	5.00	0.	0		0.	
HENRY SAMUELI	SECRETARY					
2101 E. COAST HIGHWAY, SUITE 300						
CORONA DEL MAR, CA 92625-1941	1.00	0.	0		0.	
MICHAEL SHULMAN	DIRECTOR	İ				
2101 E. COAST HIGHWAY, SUITE 300						
CORONA DEL MAR, CA 92625-1941	1.00	0.	0		0.	
GERALD SOLOMON	EXECUTIVE DIRECTOR					
2101 E. COAST HIGHWAY, SUITE 300		]				
CORONA DEL MAR, CA 92625-1941	8.00	96,786.	2,439	<u>.L</u>	0.	
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	[ /d\a	1		
(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	accou allo	xpense int, other wances	
MICHELLE FREEMAN - 2101 E. COAST HWY	PROGRAM MANAGER					
# 300, CORONA DEL MAR, CA 92625	40.00	116,505.	4,081	.]	0.	
		]				
Total number of other employees paid over \$50,000			<b>&gt;</b>		0	

Part VIII Information About Officers, Directors, Trustees, Foundary Paid Employees, and Contractors (continued)	undation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none,	enter "NONE."	
(a) Name and address of each person paid more than \$50,000	, (b) Type of service	(c) Compensation
H&S VENTURES - 2101 E.COAST HIGHWAY, SUITE	PROFESSIONAL MANAGEMENT	
300, CORONA DEL MAR, CA 92652-19	SERVICES	118,312.
	<del></del>	
Total number of others receiving over \$50,000 for professional services		<b>D</b> 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 paper	rs produced, etc.	Expenses
1 N/A		- <del></del>
· · · · · · · · · · · · · · · · · · ·		
2		
3		
4		
Part IX-B   Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax ye	ear on lines 1 and 2.	Amount
1 N/A	* * * *	
2		
All other program-related investments. See instructions.	İ	
3		
	- NA-1	
Total Add lines 1 through 3	•	0.

Forn	n 990-PF (2017) THE SAMUELI FOUNDATION	33-0758237	Page 8
Ŗ	nt X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	idations, see instruct	ions )
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	0.
b	Average of monthly cash balances	1b	164,862.
C	Fair market value of all other assets	1c	4,552.
d	Total (add lines 1a, b, and c)	1d	169,414.
е	Reduction claimed for blockage or other factors reported on lines 1a and	<b>,-</b>	
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	169,414.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,541.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	166,873.
6	Minimum investment return. Enter 5% of line 5	6	8,344.
Pá	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations, check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	8,344.
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	2,215.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	6,129.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	6,129.
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	6,129.

### Part XII: Qualifying Distributions (see instructions)

4940(e) reduction of tax in those years.

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	.	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	1,525,870.
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	1,525,870.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		- <del>-</del>
	income. Enter 1% of Part I, line 27b	5	2,215.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,523,655.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four	ndation qualifies for the	section

33-0758237

### Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI,	•	· · · · · · · · · · · · · · · · · · ·		
line 7				6,129.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			0.	
b Total for prior years:				
		0.	,	
3 Excess distributions carryover, if any, to 2017:			· ·	
a From 2012 1,104,640.				
b From 2013 1,388,059.				
c From 2014 888,102.				
dFrom 2015 862,906.				,
e From 2016 902, 267.				
f Total of lines 3a through e	5,145,974.			
4 Qualifying distributions for 2017 from				
Part XII, line 4: ►\$ 1,525,870.				
a Applied to 2016, but not more than line 2a			0.	
b Applied to undistributed income of prior				<del></del>
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount				6,129.
e Remaining amount distributed out of corpus	1,519,741.			
5 Excess distributions carryover applied to 2017	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	6,665,715.			
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 2016. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2018	· · · · · · · · · · · · · · · · · · ·			0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	1,948,500.			
8 Excess distributions carryover from 2012				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	4,717,215.			
10 Analysis of line 9:				
a Excess from 2013 544,199.				
<b>b</b> Excess from 2014 888, 102.				
c Excess from 2015 862,906.				
d Excess from 2016 902, 267.				
e Excess from 2017 1,519,741.				

723581 01-03-18

orm 990-PF (2017) THE SAMUELI Part XIV   Private Operating Fou		structions and Part \	/II-A, question 9)	33-07582 N/A	237 Pa
1 a If the foundation has received a ruling or d	etermination letter tha	t it is a private operating	· · · · · · · · · · · · · · · · · · ·		
foundation, and the ruling is effective for 2	017, enter the date of	the ruling	▶		
b Check box to indicate whether the foundate	on is a private operatii	ng foundation described	I in section	4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed				X	
d Amounts included in line 2c not			<del>                                     </del>	<u> </u>	
used directly for active conduct of				1	
exempt activities					•
e Qualifying distributions made directly			<del>                                     </del>		
for active conduct of exempt activities.					
· I			1/		
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the	······································		/	<del>-  </del> .	
alternative test relied upon:		/	<b>′</b>		
a "Assets" alternative test - enter:		/			
(1) Value of all assets	<del></del>	//			
(2) Value of assets qualifying		/			
under section 4942(j)(3)(B)(i)		ļ <i>/</i>	1		
b "Endowment" alternative test - enter 2/3 of minimum investment return		/			
shown in Part X, line 6 for each year		/			
listed		/	<del>_</del>		
c "Support" alternative test - enter:		/			
(1) Total support other than gross		1			
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 Inforr			, if the foundation	n had \$5,000 or mo	ore in assets
at any time during the	e year-see inst	ructions.)			
1 Information Regarding Foundation	Managers:				
a List any managers of the foundation who h		than 2% of the total co	ntributions received by th	ne foundation before the clos	se of any tax
year (but only if they have contributed mor	e than \$5,000). (See s	section 507(d)(2).)			
EE STATEMENT 10					
b List any managers of the foundation who o	own 10% or more of th	e stock of a corporation	ı (or an equally large por	tion of the ownership of a pa	artnership or
other entity) of which the foundation has a	10% or greater intere	st.			
ONE					
2 Information Regarding Contribution	ı, Grant, Gift, Loan	, Scholarship, etc., l	Programs:		
Check here ► x if the foundation only				not accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc., to	individuals or organiz	ations under other cond	itions, complete items 2	a, b, c, and d.	
a The name, address, and telephone number	r or email address of the	ne person to whom app	lications should be addre	essed.	
b The form in which applications should be s	submitted and informa	tion and materials they	should include:		
c Any submission deadlines:					
·				· · · · · · · · · · · · · · · · · · ·	
d Any restrictions or limitations on awards, s	such as by geographic	al areas, charitable field	s, kinds of institutions, o	r other factors:	
23601 01-03-18		·		<del></del>	Form <b>990-PF</b> (
		10	)		'
11019 144414 1271	201		E SAMUELI FO	OUNDATION	1271

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or **Amount** status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year ALL WITHIN MY HANDS FOUNDATION NONE SOCIAL SERVICES ÞС 10990 WILSHIRE BLVD, 8TH FLOOR LOS ANGELES, CA 90024 10,000. EDUCATION AMERICAN ACADEMY OF ARTS & SCIENCES NONE 136 IRVING STREET CAMBRIDGE, MA 02138-1996 5,000. NONE HEALTH AMERICAN RED CROSS 601 NORTH GOLDEN CIRCLE DR. SANTA ANA, CA 92705 10,000. ANAHEIM DUCKS FOUNDATION SOCIAL SERVICES NONE ÞС 2695 E. KATELLA AVE 500. ANAHEIM, CA 92806 NONE SOCIAL SERVICES BOYS AND GIRLS CLUB OF SANTA ANA INC ÞС 250 N. GOLDEN CIRCLE DRIVE SUITE 104 2,500. SANTA ANA, CA 92705 974,700. SEE CONTINUATION SHEET(S) ➤ 3a Total **b** Approved for future payment NONE **▶** 3b Total Form **990-PF** (2017)

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

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		ided by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	
a	_		1		
b	_				
C			<u> </u>		
d	_				
e			L		
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	48.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income		-			
8 Gain or (loss) from sales of assets other than inventory			18	-3,237.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			<u> </u>		
11 Other revenue:					
a					
b					
С					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		-3,189.	
13 Total. Add line 12, columns (b), (d), and (e)	<del></del>			13	-3,189.
(See worksheet in line 13 instructions to verify calculations.	)			_	

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

▼	the foundation's exempt purposes (other than by providing funds for such purposes).				
$\overline{}$					
$\longrightarrow$					
$\longrightarrow$					

Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of

Form **990-PF** (2017)

723621 01-03-18

Part			egarding Tran	sfers to a	nd Transactions a	nd Relations	hips With Noncl	haritable		190 10
		<b>Exempt Organ</b>					•			
1 Did	the org	anization directly or indi	rectly engage in any	of the followin	g with any other organizati	on described in sec	tion 501(c)		Yes	No
(otl	ner thar	section 501(c)(3) organ	uzations) or in sectio	n 527, relatınç	g to political organizations?					·
a Tra	nsfers f	rom the reporting founda	ation to a noncharita	ble exempt or	ganization of:					ا ۔ ا
(1)	Cash							1a(1)		х
(2)	Other	assets						1a(2)		Х
<b>b</b> Oth	er trans	actions:							_	,
(1)	Sales	of assets to a noncharita	ble exempt organiza	tion				1b(1)	<u> </u>	х
(2)	Purch	ases of assets from a no	ncharitable exempt o	organization				1b(2)		х
(3)	Renta	of facilities, equipment,	or other assets					1b(3)		х
(4)	Reimb	ursement arrangements						1b(4)		х
(5)	Loans	or loan guarantees						1b(5)	<u> </u>	х
(6)	Perfor	mance of services or me	mbership or fundrai	sıng solıcıtatıo	ns			1b(6)		X
	-	facilities, equipment, ma	= :		· ·			1c		Х
		•		=	dule. Column (b) should at				sets,	
					ed less than fair market vali	ue in any transactio	on or sharing arrangeme	nt, show in		
		the value of the goods,				- 1				
(a)Line n	<u> </u>	(b) Amount involved	(c) Name of		e exempt organization	(d) Description	on of transfers, transactions,	and sharing ar	rangeme	ents
		. <u>.</u>		N/A		_ <b> </b>				
	_					_ <u> </u>		· · · · · · · · · · · · · · · · · · ·		
		<del></del>	<u> </u>							
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	+		<del>                                     </del>							
			<del>                                     </del>							
20 10 1	bo four	dation directly or indirec	the affiliated with or	related to one	or more tax-exempt organ	rations described				
		501(c) (other than sectio	•		or more tax-exempt organ	izations described		Yes	X	□No
		mplete the following sch		5011011 327				103		_ 110
יויט	163, 60	(a) Name of org			(b) Type of organization	T	(c) Description of relati	onship		
		N/A	,	•	(-, -, -,	<del> </del>	(1)	•		
						1	····· <u></u>			
		• • •								
							<del>"</del>			
					ig accompanying schedules and			May the IHS	discuss	this
Sign	and be	lief, it in true, correct, and cor	plete Declaration of pr	reparer (other tha	n taxpayer) is based on all infori	mation of which prepar	er nas any knowledge	return with the shown below	e prepai	rer
Here		Muly			1/0/23/18	DIRECTO	R	X Yes		□No
	Sign	atyre of officer or trustee	)		Date /	Title				
		Print/Type preparer's na	ame	Preparer's s	ignature	Date	Check if PT	TIN		
				QZ	, ,	10/19/2018	self- employed			
Paid		BRIAN YACKER		من ري		10/13/2018		00401346		
Prep		Firm's name ► YH A	DVISORS, INC.				Firm's EIN ► 45-3	269313		
Use (	Only				<del> </del>					
		Firm's address ► 775	m's address ► 7755 CENTER AVENUE, SUITE 1225				ĺ			

Phone no. 310-982-2803

HUNTINGTON BEACH, CA 92647

Part XV Supplementary Information 3 Grants and Contributions Paid During the Y			· -· · · · · · · · · · · · · · · · · ·	1
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
CAL ATHLETICS FUND 195 HAAS PAVILION BERKLEY, CA 94720	NONE	PC	EDUCATION	25,000.
CALIFORNIA SCIENCE TEACHERS ASSOCIATION 950 GLENN DR., SUITE 150 FOLSOM, CA 95630	NONE	₽C	EDUCATION	5,000.
CARE POSSIBLE 28202 CABOT ROAD, SUITE 300 LAGUNA NIGUEL, CA 92677	NONE	PC	SOCIAL SERVICES	10,000.
CENTER FOR ENTREPRENEURIAL JEWISH PHILANTHROPY 435 STRATTON ROAD NEW ROCHELLE, CA 10804	NONE	₽C	RELIGIOUS	10,000.
CHILD CREATIVITY LAB 1815 E. WILSHIRE AVENUE, SUITE 906 SANTA ANA, CA 92705	NONE	PC	SOCIAL SERVICES	10,000.
COMMUNITY PARTNERS 1000 NORTH ALAMEDA ST., SUITE 240 LOS ANGELES, CA 90012	NONE	PC	HEALTH	10,000.
CROSSOVER DOWNTOWN OUTREACH MINISTRY 401 W. COURT STREET FLINT, MI 48503	NONE	₽C	SOCIAL SERVICES	10,000.
CRYSTAL COVE CONSERVANCY #5 CRYSTAL COVE NEWPORT COAST, CA 92657	NONE	₽C	EDUCATION	10,000.
ENVISION EXCELLENCE IN STEM 2108 LAMBERTON RD CLEVELAND HEIGHTS, OH 44118	NONE	PC	EDUCATION, ARTS	169,500.
FAMILY PROMISE OF ORANGE COUNTY PO BOX 6225 ORANGE, CA 92683	NONE	PC	SOCIAL SERVICES	10,000. 946,700.

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or Foundation show any relationship to Amount any foundation manager status of contribution Name and address (home or business) recipient or substantial contributor FRIENDS OF YEMIN ORDE NONE ÞС RELIGIOUS 4340 EAST-WEST HWY., #202 BETHESDA, MD 20814 5,000. RELIGIOUS FUENTE LATINA NONE ÞС 1125 NE 125 ST. NORTH MIAMI, FL 33161 21,000. GEORGE FAMILY FOUNDATION NONE ÞС HEALTH 1818 S. OLIVER AVENUE SOUTH MINNEAPOLIS, MN 55405 21,000. SOCIAL GIRLS INCORPORATED OF ORANGE COUNTY NONE ÞС 150 PAULINO AVE, SUITE D-290 COSTA MESA, CA 92626 2,500. GRANTMAKERS OF EDUCATION РC EDUCATION NONE 720 SW WASHINGTON ST SUITE 605 PORTLAND, OR 92705 250. HABITAT FOR HUMANITY INTERNATIONAL NONE ъC SOCIAL SERVICES 121 HABITAT STREET 500. AMERICUS, GA 31709 HANDS TOGETHER NONE ЬC SOCIAL SERVICES 201 CIVIC CENTER DRIVE 10,000. SANTA ANA, CA 92701 NONE ₽C EDUCATION HARBOR VIEW PARENT FACULTY ORGANIZATION 900 GOLDENROD AVENUE 3,000. CORONA DEL MAR, CA 92626 HIGHER GROUND YOUTH & FAMILY SERVICES NONE SOCIAL SERVICES TOTAL 23001 E. LA PALMA AVENUE, SUITE 220A 10,000. YORBA LINDA, CA 92887 JEWISH FEDERATION & FAMILY OF OC RELIGIOUS NONE РC 1 FEDERATION WAY, SUITE 210 60,000. IRVINE, CA 92603 Total from continuation sheets

Part XV Supplementary Information  3 Grants and Contributions Paid During the Y				T
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	_
JUVENILE DIABETES RESEARCH FOUNDATION	NONE	PC	HEALTH	
8 HICKORY FORK				
COTO DE CAZA, CA 92679				500
	VOVE	na	COCTAL CERVICES	
LONG BEACH COMMUNITY FOUNDATION 400 OCEANGATE, SUITE 800	NONE	PC	SOCIAL SERVICES	
LONG BEACH, CA 90802				5,000
· · · · · · · · · · · · · · · · · · ·		}		
LONG BEACH OPERA	NONE	₽C	ARTS	
507 PACIFIC AVE				
LONG BEACH, CA 90802				5,000
MACCABI WORLD UNION, INC.	NONE	PC	SOCIAL SERVICES	
15 W. 36TH STREET, 13TH FLOOR NEW YORK, NY 10018				500
MARCONI FOUNDATION FOR KIDS	NONE	PC	SOCIAL SERVICES	
1302 INDUSTRIAL DRIVE				
TUSTIN, CA 92780				6,500
MARCONI SOCIETY	NONE		EDUCATION	,
P.O. BOX 777				25,000
MOUNTAIN VIEW, CA 94042				23,000
MAYO CLINIC TOTAL	NONE	PC	HEALTH	:
200 FIRST STREET SW	NONE			
ROCHESTER, MN 55905				5,000
MICHIGAN STATE UNIVERSITY	NONE	₽C	EDUCATION	
632 BOGUE STREET, ROOM N505				5,000
EAST LANSING, MI 48824				3,000
MUSEUM OF LATIN AMERICAN ART IN LB	NONE		ART	
628 ALAMITOS AVE				
LONG BEACH, CA 90802				2,000
OC GATEWAY TO HOUSING	NONE	PC	SOCIAL SERVICES	
17972 SKY PARK CIRCLE, BUILDING #47, SUITE E IRVINE, CA 92614				10,000
Total from continuation sheets	<u> </u>		<u> </u>	i

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or contribution show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor OCSA FOUNDATION NONE EDUCATION 1010 N. MAIN STREET SANTA ANA, CA 92705 5,000. ONEOC NONE ÞС SOCIAL SERVICES, EDUCATION 1901 E FOURTH STREET, SUITE 100 SANTA ANA, CA 92705 41,000. ORANGEWOOD CHILDREN'S FOUNDATION NONE ÞС SOCIAL SERVICES, EDUCATION - 1575 EAST 17TH STREET SANTA ANA, CA 92705 29,000. PACIFIC CLUB IMPACT FOUNDATION NONE PC SOCIAL SERVICES 4110 MACARTHUR BLVD 5,000. NEWPORT BEACH, CA 92660 PARTNERSHIP FOR CHILDREN & YOUTH NONE ÞС EDUCATION 1330 BROADWAY, SUITE 601 25,000. OAKLAND, CA 94612 EDUCATION PHILANTHROPY ROUNDTABLE NONE ÞС 1730 M STREET, NW SUITE 601 500. WASHINGTON, DC 20036 QUAN AM BUDDHIST MEDITATION NONE ÞС RELIGIOUS 12670 18TH STREET 1,000. REDLANDS, CA 92373 HEALTH ÞС SAMUELI INSTITUTE INFORMATION BIOLOGY NONE 1737 KING STREET, SUITE 600 ALEXANDRIA, VA 22314 100,000. NONE EDUCATION SANTA CLARA UNIVERSITY SCHOOL OF LAW 500 EL. CAMINO REAL 1 SANTA CLARA, CA 95053 22,550. SERVING KIDS HOPE NONE ÞС SOCIAL SERVICES 2100 W ALTON AVENUE #2 10,000. SANTA ANA CA 92704 Total from continuation sheets

Part XV Supplementary Informatio				1
3 Grants and Contributions Paid During the	If recipient is an individual,	<del></del>	T	
Recipient  Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Ivalite and address (notice of business)	or substantial contributor	recipient		<u> </u>
SHARE OUR SELVES	NONE	PC	HEALTH	
1550 SUPERIOR AVE		İ		1 000
COSTA MESA, CA 92627				1,000.
SOCIETY FOR SCIENCE & THE PUBLIC	NONE	PC	EDUCATION	
1719 N. STREET NW WASHINGTON, DC 20036		1		25,000.
WASHINGTON, DC 20036		<u></u>		23,000.
GOVERNOON ON THOUNTS DIVINI TO DAD TO	VONE	nc	A P.M.C.	
SOUTHERN CALIFORNIA PUBLIC RADIO	NONE	PC	ARTS	
474 S. RAYMOND AVE PASADENA, CA 91105				1,000.
Thomas, or 9220		<u> </u>		
CDTN	NONE	PC	SOCIAL SERVICES	
SPIN 151 KALMUS, SUITE H-2	NONE	PC	SOCIAL SERVICES	
COSTA MESA CA 92626				10,000.
ST. MARGARET OF SCOTLAND EPISCOPAL	NONE	₽C	EDUCATION	
SCHOOL				
31641 LA NOVIA AVE.				25 000
SAN JUAN CAPISTRANO, CA 92067				25,000.
STARS AND STRIPES CHILDREN'S	NONE	₽C	SOCIAL SERVICES	
FOUNDATION				
PO BOX 7572	,			
LAGUNA NIGUEL, CA 92067				1,050.
STRENGTH IN SUPPORT	NONE	₽C	SOCIAL SERVICES	
23461 SOUTH POINTE DRIVE, SUITE 310				
LAGUNA HILLS, CA 92653		<del>                                     </del>		10,000.
THE "1939" CLUB	NONE	₽C	RELIGIOUS	
8950 W OLYMPIC BLVD, SUITE 437				650
BEVERLY HILLS, CA 90211		-		650.
THE NATIONAL ACADEMY OF ENGINEERING	NONE	₽C	EDUCATION	
500 FIFTH STREET-NW				
WASHINGTON, CA 20001		<del> </del>		10,000.
THE UNIVERSITY OF ARIZONA	NONE	₽C	EDUCATION	
FOUNDATION/UACIM				
PO BOX 245018				_
TUCSON, AZ 85724		<u> </u>	<u></u>	55,000.
Total from continuation sheets				i

Part XV Supplementary Informatio 3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	71110011
TIYYA FOUNDATION	NONE	PC	SOCIAL SERVICES	
505 N. TUSTIN AVENUE, SUITE 280				10 000
SANTA ANA, CA 92705	+			10,000
TO WRITE LOVE ON HER ARMS	NONE	₽C	SOCIAL SERVICES	
PO BOX 2203	ANDA		BOCIAL SERVICES	
MELBOURNE, FL 32902				10,000
UCI FOUNDATION	NONE	PC	EDUCATION	
1034 HEWITT HALL				15 000
IRVINE, CA 92697				15,000
UCI REGENTS 1328 CRAWFORD HALL	NONE	PC	HEALTH	
IRVINE, CA 92697				1,000
UCLA FOUNDATION	NONE	PC	EDUCATION	
P.O. BOX 24044				
LOS ANGELES, CA 90024				27,200
UNIVERSITY OF MINNESOTA FOUNDATION 420 DELAWARE STREET SE, MMC 505	NONE	PC	EDUCATION	
MINNEAPOLIS, MN 55455				10,000
USA HOCKEY FOUNDATION	NONE	₽C	SOCIAL SERVICES	1
1775 BOB JOHNSON DRIVE				2 500
COLORADO SPRINGS, CO 80906				2,500
VOCATIONAL VISIONS 26041 PALA	NONE	PC	SOCIAL SERVICES	
MISSION VIEJO, CA 92691		<u> </u>		25,000
YOU CAN PLAY	NONE	PC	SOCIAL SERVICES	
PO BOX 7460				1 000
DENVER, CO 80207				1,000
Total from continuation sheets				<u> </u>

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

Department of the Treasury Internal Revenue Service

Name of the organization

# **Schedule of Contributors**

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

➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Employer identification number

THE	SAMUELI FOUNDATION	33-0758237
Organization type (check or	ne)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> 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	
General Rule  X For an organization	7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru  I filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor.	g \$5,000 or more (in money or
Special Rules		
sections 509(a)(1) a any one contributo	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, r, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amou	or 16b, and that received from
year, total contribu	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educing to children or animals. Complete Parts I, II, and III	
year, contributions is checked, enter h purpose Don't con	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from exclusively for religious, charitable, etc., purposes, but no such contributions totaled mere the total contributions that were received during the year for an exclusively religious inplete any of the parts unless the <b>General Rule</b> applies to this organization because it is, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000 If this box s, charitable, etc ,
but it must answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (F Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form filling requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	•

Name of organization Employer identification number

THE SAMUELI FOUNDATION 33-0758237

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional additional contributors (see instructions)	onal space is needed	_
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	HS PORTFOLIO L.P.  2101 E. COAST HIGHWAY, SUITE 300  CORONA DEL MAR, CA 92625-1941	- \$\$	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	HS MANAGEMENT L.P.  2101 E. COAST HIGHWAY, SUITE 300  CORONA DEL MAR, CA 92625-1941	\$172,025.	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 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
		- \$ Sahadala B // Fare	Person Payroll Noncash (Complete Part II for noncash contributions)

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)
Name of organization Employer identification number 33-0758237 THE SAMUELI FOUNDATION

Part II	Noncash Property (see instructions) Use duplicate copies of Par	t 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
,	11,000 SHRS LAREDO COMPANY	_	
1			
		\$ 156,475.	03/06/17
(a) No.	<b>(b)</b>	(c)	(d)
from Part I	Description of noncash property given	FMV (or estimate) (See instructions.)	Date received
2	5,880 SHRS ANTERO RESOURCES CORPORATION		
<del></del>	1,650 SHRS TRITON		
		\$ \$	11/21/17
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	<del></del>
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		<del></del>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<del></del>			
<del></del>		_	
		\$Sahadula B /Farm (	100 000 E7 or 000 PE) /2017)

723454 11-01-17

09511019 144414 1271

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

FORM 990-PF INTEREST ON SAVING	S AND TEMPORARY	CASH INVESTMENTS	STATEMENT 1
SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
INTEREST INCOME	48.	48.	
TOTAL TO PART I, LINE 3	48.	48,	

(A) DESCRIPTION OF PROPERTY			MANNER ACQUIRED	DATE ACQUIRED	DATE SO	)LD
LAPTOP -DELL			PURCHASED	06/14/15	03/31/	17
		(D)	(E)		(F)	
	ST OR E R BASIS	EXPENSE OF SALE	DEPREC	. GAIN	OR LOSS	;
0.	630.	0.		0.	-6	30.
NET GAIN OR LOSS FROM SALE O	F ASSETS				-3,2	237.
CAPITAL GAINS DIVIDENDS FROM	PART IV					0,
TOTAL TO FORM 990-PF, PART I	, LINE 6A				-3,2	237.
						_
FORM 990-PF	LEGAL	FEES		STA	TEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS		() T- ADJ ME NET		(D) CHARITAB PURPOSE	
LEGAL FEES	6,746.	. 1	,687.		2,6	598.
TO FM 990-PF, PG 1, LN 16A	6,746.	, 1	,687.		2,6	98.
FORM 990-PF	ACCOUNTI	NG FEES		STA	TEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS		() T- ADJ ME NET	C) USTED INCOME	(D) CHARITAB PURPOSE	
ACCOUNTING FEES	6,500.	. 1	,625.		2,6	500.
TO FORM 990-PF, PG 1, LN 16B	6,500.	. 1	,625.		2,6	500.

FORM 990-PF	OTHER PROFES	SIONAL FEES		ratement 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
MANAGEMENT FEES OTHER PROFESSIONAL FEES	12,000. 161,923.			0. 161,923.
TO FORM 990-PF, PG 1, LN 16C	173,923.	4,800.		161,923.
FORM 990-PF	TAX	ES	S	PATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAX & LICENSE	75.	0.		0.
PAYROLL TAX	21,920.	0.		17,536.
FEDERAL TAX	5,550.	0.		0.
STATE TAX	10.			0.
PROPERTY TAXES	47.	0.		23.
TO FORM 990-PF, PG 1, LN 18	27,602.	0.		17,559.
FORM 990-PF	OTHER E	XPENSES	S'	ratement 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OPELCE	1.553			
OFFICE BENEFIT PLAN ADMINISTRATION	1,661. 1,327.	0. 0.		0. 1,062.
TELEPHONE AND INTERNET	14,192.			7,096.
INSURANCE	8,111.	0.		0.
PAYROLL PROCESSING	2,620.	0.		2,096.
DUES AND SUBSCRIPTIONS	846.	0.		846.
POSTAGE	9.	0.		. 0.
CUSTODIAL FEES	500.	0.		250.
TO FORM 990-PF, PG 1, LN 23	29,266.	0.		11,350.

	GOGT OD	A COUNCIL AMED		EATD MADVEM
DESCRIPTION ,	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE	FAIR MARKET VALUE
SOFTWARE - WEBSITE	14,700.	14,700.	0.	. 0.
SOFTWARE - CRM	10,800.	10,800.	0.	
SOFTWARE - CRM	5,400.	5,400.	0.	
SOFTWARE - CRM	5,400.		0.	
SOFTWARE - CRM	8,615.	8,615.	0,	
SOFTWARE - IOS APP	6,000.	6,000.	0,	
GRANTMAKING WEBSITE	3,500.	3,500.	0,	
GRANTMAKING WEBSITE	3,695.	3,695.	0,	
LAPTOP	1,273.	813.	460,	
LAPTOP	1,205.	770. 480.	435. 601.	
LAPTOP LAPTOP	1,081. 2,652.	1,179.	1,473,	
LAPTOP	1,900.	317.	1,583.	
TO 990-PF, PART II, LN 14	66,221.	61,669.	4,552.	4,552.
FORM 990-PF	OTHER LI	ABILITIES		STATEMENT 9
DESCRIPTION		ВС	TOUNT YOUR	EOY AMOUNT
DUE TO SHILOH TRUST PAYROLL LIABILITIES			200,000.	0. 1,800.
TOTAL TO FORM 990-PF, PART	II, LINE 22		200,000.	1,800
FORM 990-PF	PART XV - 1			STATEMENT 10

NAME OF MANAGER

SUSAN SAMUELI HENRY SAMUELI

# 2017 DEPRECIATION AND AMORTIZATION REPORT

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FORM	FORM 990-PF PAGE 1						6	990-PF							
Asset No	Description	Date Acquired	Method	Lıfe	) 0 c >	No COS	Unadjusted Cost Or Basis	Bus S % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
1	11 SOFTWARE - WEBSITE	01/11/08	TS	3.00	) I	9 1	14,700.				14,700.	14,700.		0.	14,700.
1	12 SOFTWARE - CRM	01/15/08	SI	3.00	<u> </u>	-     e	10,800.		1		10,800.	10,800.		0.	10,800.
н .	13 SOFTWARE - CRM	01/15/08	SI	3.00	16	9	5,400.				5,400.	5,400.		0.	5,400.
	14 SOFTWARE - CRM	02/01/08	SI	3.00	ਜ਼ੋ	   e	5,400.				5,400.	5,400.		0.	5,400.
(	15 SOFTWARE - CRM	09/26/08	SI	3.00	1 1	9	8,615.	! 			8,615.	8,615.		0	8,615.
	16 (D)LAPTOP	05/27/11	SI	3.00	<u> </u>	ا ا و ا	1,265.				1,265.	1,265.		0.	1,265.
1	18 SOFTWARE - IOS APP	12/01/12	SL	3.00	. I	9	6,000.				6,000.	6,000.		0.	6,000.
7	29 (D)COMPUTER (DESKTOP)	01/01/13	ST	3.00	H	ا و	1,546.				1,546.	1,546.		0.	1,546.
3	30 (D)LAPTOP	08/08/13	SI	3.00	<u> </u>	9	1,109.	ļ			1,109.	1,109.		0.	1,109.
	32 GRANTMAKING WEBSITE	09/30/13	SL	3.00	<u> </u>	ا و ا	3,500.				3,500.	3,500.		0	3,500.
3	33 GRANTMAKING WEBSITE	10/03/13	SI	3.00	<u> </u>	9	3,695.				3,695.	3,695.		0.	3,695.
4	44 (D)LAPTOP	06/14/15	SI	3.00		<u> </u>   ود	1,620.	.			1,620.	855.		135.	990.
2	55 LAPTOP	01/29/16	SI	3.00	<u> </u>	9	1,273.				1,273.	389.		424.	813.
5	56 LAPTOP	02/24/16	SI	3.00	_ = 1	ا و	1,205.				1,205.	368.		402.	770.
5	57 LAPTOP	08/23/16	SI	3.00	<u> </u>	9	1,081.				1,081.	120.		360.	480.
5	58 LAPTOP	09/12/16	SI	3.00	<u> </u>	9	2,652.				2,652.	295.		884.	1,179.
۹	69 LAPTOP	07/21/17	SI	3.00	Ä	9	1,900.				1,900.			317.	317.
	* TOTAL 990-PF PG 1 DEPR					<u> </u>	71,761.				71,761.	64,057.		2,522.	66,579.
728111	728111 04-01-17					<u>(</u>	(D) - Asset disposed	pesc		*	ITC, Salvage,	* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zon	iercial Revita	lization Deduc	tion, GO Zon

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\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2017 DEPRECIATION AND AMORTIZATION REPORT

Method         Life         0, No. 0.01 Of Bass         % Septement         Septement         Properties and Propertie	$\sim$ .	FORM 990-PF PAGE 1	1					ᇤᅳ	70,000	* 400	20000	G	400	yeo V	2 c c c c c c c c c c c c c c c c c c c
858 858 866,221 866,221 867,221 867,221 867,221 867,221 867,221 867,221 867,221 867,221 867,222 867,222 867,223 867,233 867,233 867,233 867,233 867,233 867,233 867,233 867,233 867,233 86		Description	Date Acquired			<u> </u>	Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
NATIONES  1. 900.  1.	CURRI	SNT YEAR ACTIVITY													
ONS  TO SER LESS	BE	GINNING BALANCE		}			, 69			0.		057			
VALUE  VA		ACQUISITIONS					1,900.			0.		0.			317.
W DEPR LESS  W DEPR LESS  VALUE  ( VALUE   C. C. 221.   C. C. 221.   C. C. 221.   C. C. 222.   C		DISPOSITIONS							i	0.		, 775			4,910.
( VALUE   C. VALUE   C	EN	DING BALANCE					66,221.			0.	66,221.	59,282.			61,669.
( VALUE	EN	DING ACCUM DEPR LESS OSITIONS				<u> </u>	f					61,669.			
	EN	DING BOOK VALUE		<u> </u>								ļ			
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(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone