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Return of Private r-oundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
on may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052" 2008

Fo	or ca	lendar	·	or tax year begi		1	2/0	o <sub>1</sub> , 2008,	and end	ing	<u> </u>	1	1/30,2009
_			hat apply	Initial retur		Final return	T	Amended r	eturn		Address change		Name change
_			Name of fou	indation					•		A Employer identific	ation	number
ι	Use th	ne IRS											
	lab	el.	EMMETT F	COUNDATION							20-0	429	029
1	Other		Number and	street (or P O box	f mail is not delivered to	street	address)	Room/su	ııte	B Telephone number (see	page 10	of the instructions)	
	print C/O HOLTHOUSE CARLIN & VA					VAN TRIGT, L	LP.					-	
9	or t	ype. pecific	15760_VE	NTURA BLVD.					1700				49-3140
		ctions.	City or town,	, state, and ZIP coo	le						<ul> <li>If exemption applicate pending, check here</li> </ul>	on is	▶ 🔲
											D 1. Foreign organization		eck here . ►
			ENCINO,	CA 91436							2. Foreign organizati		
Н	Che	ck type	e of organiza	ition X Section	on 501(	(c)(3) exempt priva	ate f	oundation			85% test, check he computation		
	s	ection_4	4947(a)(1) noi	nexempt charitable	trust	Other taxable	e pri	vate foundat	ion		E If private foundation	etatue v	was terminated —
ī	Fair	marke	et value of all	assets at end	J Acco	ounting method 🔯	∡ Ca	ash Acc	rual		under section 507(b)		- 1
	of y	ear <i>(fr</i> o	m Part II, col	l (c), line	🗀 o	ther (specify)					F If the foundation is i	n a 60-r	nonth termination
	16)	<b>&gt;</b> \$ _	4,76	52,387	(Part I,	column (d) must b	e on	cash basis )			under section 507(b)(	1)(B), c	heck here
F	art	Analy	sis of Reve	nue and Expens	es (The	(a) Revenue and		(h) Not inve	atmont		(a) Advisted not	٠,	Disbursements
				olumns (b), (c), and equal the amounts		expenses per	'	(b) Net inve	J		(c) Adjusted net income	ī	for charitable purposes
				e 11 of the instruct		books						(c	ash basis only)
	1	Contribu	tion <u>s, gift</u> s, grants,	etc , received (attach sch	edule) .	667,19	2.						
	2	Check	_   If the f	foundation is <b>not</b> requ Sch B.	ured to								
<b>=</b>	3	Interest		temporary cash inves		15, 11	3.	15	5,113.		15, 113.		STMT 1
	4	Divider	nds and intere	est from securities		54,51	1.	54	1,511.		54,511.		STMT 2
	5 a	Gross i	rents										
χ Σ				ss)									
	1			sale of assets not on I		-456,65	55.						
	b		ales price for all on line 6a	1,337	<u>,959.</u>								
) JUL Revenue	7			me (from Part IV, I	ine 2) .		]						
$\square^{\kappa}$	8		oft-term Capita		· · · ·								·
Ш	9	Income	e modifications	CEIVICU.	.								
<u></u>	10 a	Gross sa	ales Tess returns		ပြပ္တ								
	Ь	Less C	de cargoods sold	2 2 2010	8								
Ü	C	Gross	profit or (loss)	(attach schedule)	<u>با نی</u>								
$\bar{\mathcal{O}}$	11	Other	ncome (affact	schedule)	<u>"</u> ]								
_	12	Total.	ncome affect Add imes 1 in	form UI	<u> </u>	280,16	51.	69	624.		69,624.		
	13	Compe	nsation of officer	rs, directors, trustees,	etc	NC NC	ONE						
ဟ	14	Other	employee sala	ries and wages .									
ses	15	Pensio	n plans, empl	oyee benefits									
en	16a	Legal f	fees (attach sc	hedule)				<del></del>					
Ä	b			ach schedule)STM		8,27	76.		NONE		NONE		8,276.
and Administrative Expense	c			ees (attach schedul									
ati	17	Interes	i <b>t</b> .										
isti	18	Taxes (	attach schedule)	(see page 14 of the inst	ructions) *	2,38	30.		NONE		NONE		8 <u>5</u> .
Ë	19	Depre	ciation (attach	schedule) and dep	pletion.								
F	20	Occup	ancy										
Þ	21		-	and meetings									
a L	22			tions									
ng	23		-	ach schedule)									
Operating	24			administrative ex									
pe			-	h 23		_10,65	6.		NONE		NONE		8,361.
0	25		<del>-</del>	grants paid		2,384,18							2,384,182.
_	26		-	sements. Add lines 24		2,394,83			NONE		NONE		2,392,543.
	27		ct line 26 fron										
	a	Excess o	of revenue over exp	penses and disburseme	ents	-2,114,67	77.						
	Ь	Net in	vestment inco	ome (if negative, en	ter -0-)			69	624.				
	I			e (if negative, enter							69,624.		

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. \* \* STMT-4 JSA 8E1410 1 000

JSA 8E1420 1 000

6

4 Add lines 1, 2, and 3 . . . . .

5 Decreases not included in line 2 (itemize) ▶

3, 815, 905. Form **990-PF** (2008)

3,815,905.

4

6

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

Form 990-PF (2008)		20-04290	)29		Page 3
Part IV Capital Gain	s and Losses for Tax on Inv	estment income	(b) How	1 7 5 5 4	<del>,</del>
, (a) List an	acquired P-Purchase	(c) Date	(d) Date sold (mo., day, yr.)		
2-story t	D-Donation	(mo , day, yr )	(, 22), j,		
1a SEE PART IV SCHE	DULE		<del> </del>	-	
<u>b</u>					<del> </del>
<u>c</u>	· · · · · · · · · · · · · · · · · · ·			-	
e					-
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo	
a				-	
b					
c					
d					
е					
Complete only for assets s	howing gain in column (h) and own	ned by the foundation on 12/31/69	(1)	Gains (Col (h) g	ain minus
(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	col	(k), but not less t Losses (from co	
a					
<u>b</u>					
С					
d					
е					
2 Capital gain net income or		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		456,655.
3 Net short-term capital gair	n or (loss) as defined in sections 12	,			
If gain, also enter in Part I	, line 8, column (c) (see pages 13	and 17 of the instructions).	<u> </u>		
If (loss), enter -0- in Part I,	line 8,	<u> </u>	3		
		uced Tax on Net Investment Inc	ome		
		outable amount of any year in the b	ase perio	ժ <sup>ջ.</sup>	Yes X No
<del></del>		; see page 18 of the instructions be	efore mak	ing any entries	
(a)	(b)	(c)	l lord man	(d)	
Base penod years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
2007	860,787.	6,419,670.			0.134086
2006	338,438.	5, 486, 008.			0.061691
2005	136,077.	3,588,044.			0.037925
2004	26,000.	2,879,876.			0.009028
2003	91,000.	1,986,611.			0.045807
2 Total of line 1, column (d	),,,,	.,.,,,,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2		0.288537
3 Average distribution ratio	for the 5-year base period - divide	e the total on line 2 by 5, or by the			
<ul> <li>number of years the foun</li> </ul>	dation has been in existence if less	s than 5 years	3	<del>.</del>	0.057707
4 Enter the net value of nor	ncharitable-use assets for 2008 fro	m Part X, line 5	4	3	,769,372.
5 Multiply line 4 by line 3			5		217,519.
•	nt income (1% of Part I, line 27b)				
			6		696.
	• • • • • • • • • • • • • • • • • • • •		7	<del></del>	218, 215.
8 Enter qualifying distribution If line 8 is equal to or gethe Part VI instructions on	ons from Part XII, line 4	k in Part VI, line 1b, and complet	8 e that pa	2 art using a 1%	, 392, 543. tax rate. See
JSA 8E1430 1 000				Form	990-PF (2008)

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	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of	the in	structi	ons)
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling letter (attach copy of ruling letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			<u>696.</u>
	here ► X and enter 1% of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2			
3	Add lines 1 and 2			696.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			NONE
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			696.
6	Credits/Payments			
a	2008 estimated tax payments and 2007 overpayment credited to 2008 6a 6, 188.			
b	Exempt foreign organizations-tax withheld at source 6b NONE			
	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		6,	188.
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			
0	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.		5,	492.
1	Enter the amount of line 10 to be Credited to 2009 estimated tax ▶ 5, 492. Refunded ▶ 11		•	
Par	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
-	participate or intervene in any political campaign?	1 a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
-	of the instructions for definition)?	1ь		X
	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		
c		1 6		x
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		<u> </u>	
٠	(1) On the foundation \$\\$ \( \) \( \			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
t		-		
	foundation managers. ► \$  Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		x
2		•   -	<del> </del>	<u> </u>
	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	١.		
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	1	<del> </del>	X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	. 4a	<del> </del>	
	If "Yes," has it filed a tax return on Form 990-T for this year?		<del>                                     </del>	X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. 5	<del>                                     </del>	X
	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			١
	conflict with the state law remain in the governing instrument?	. 6	<del> </del>	<u> </u>
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 .	· <del>  7</del>	X	-
8 a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) $\triangleright CA_r$	_		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	. 8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)			
	or 4942(j)(5) for calendar year 2008 or the taxable year beginning in 2008 (see instructions for Part XIV on			
	page 27)? If "Yes," complete Part XIV	9	L	_ X_
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	40		x

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ar	t 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)(3)? If "Yes," attach schedule (see page 20 of the instructions)	11		<u>X</u>
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		Χ_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		Х	
	Website address ►N/A			
1.4	The books are in care of ► NORM TAMKIN Telephone no ►818-849	-31	10	
	Located at ▶15760 VENTURA BLVD., SUITE 1700 ENCINO, CA ZIP+4 ▶ 91436			
4 5	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			
13	and enter the amount of tax-exempt interest received or accrued during the year			
Par	t 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
4.	·			
та	During the year did the foundation (either directly or indirectly).  (4) Engage in the select exceptance or lessing of property with a disqualified person?  Yes X No		1 1	
	(1) Engage in the sale of exchange, of leasing of property with a disqualified person.			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or racinities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay of reimburse the expenses of, a disqualmed person.			
	(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" if			
	the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, in terminating within 30 days /			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		,,	<b>T</b>
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1 b	N/	<u>A</u>
	Organizations relying on a current notice regarding disaster assistance check here			
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 2008?	1 c	-	<u> </u>
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))			
а	At the end of tax year 2008, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2008?			
	If "Yes," list the years			
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 page 20 of the instructions )	2 b	N/	<u>A</u>
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<b>D</b>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			
	enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2008 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 2008)	3 b	N/	A
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a		Х
	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 2008?	4b		<u> </u>

orm	990-PF (200			_20-042				Page 6
Par	t VII-B	Statements Regarding Activities f	or Which Form 4	720 May Be Requ	ired (contin	ued)		· .
5 a	<ul><li>(1) Carry,</li><li>(2) Influe</li><li>direction</li><li>(3) Provide</li><li>(4) Provide</li></ul>	e year did the foundation pay or incur any amout on propaganda, or otherwise attempt to influe ince the outcome of any specific public election by or indirectly, any voter registration drive? de a grant to an individual for travel, study, or othe a grant to an organization other than a charm 509(a)(1), (2), or (3), or section 4940(d)(2)?	nce legislation (section n (see section 4955); c 	or to carry on,	Yes	X No X No X No		
	educa	fe for any purpose other than religious, charital tional purposes, or for the prevention of cruelty	to children or animals	32	Yes	X No		
b	Regulation	wer is "Yes" to 5a(1)-(5), did any of the transact ns section 53 4945 or in a current notice regal ions relying on a current notice regarding disas	rding disaster assistan	ice (see page 22 of the	instructions)?	·	5b	_N/A
	If the ansibecause if "Yes," a	wer is "Yes" to question 5a(4), does the found t maintained expenditure responsibility for the g litach the statement required by Regulations sec	ation claim exemption rant?	from the tax		X No		
	on a perso	undation, during the year, receive any funds, or onal benefit contract?		• • • • • • • • • • •	Yes	X No	6b	x_
7 a	•	wered "Yes" to 6b, also file Form 8870 he during the tax year, was the foundation a pa	irty to a prohibited tax	shelter transaction?	Yes	X No		
	t VIII	the foundation receive any proceeds or have nformation About Officers, Directors and Contractors					7b yees,	<u>  x</u>
1 _		ficers, directors, trustees, foundation m					ctions).	
		(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contribut employee bene and deferred con	efit plans	(e) Expense other allo	
	STATE!	MENT 7		NONE		NONE		NONE
							· · · · · · · · · · · · · · · · · · ·	
		ation of five highest-paid employees (ot	her than those inc	luded on line 1 - se	e page 23 o	f the instr	uctions).	
(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) Contribute employee by plans and decompensations	enefit eferred	(e) Expense other allo	e account, owances
	<u>NONE</u>							
				l	<u>.</u>			
							· <u> </u>	
	<del></del>					1		<del></del>
ota	Inumber	of other employees paid over \$50,000 .						NONE -PF (2008)

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Part VIII	Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	Managers, Highly Paid Emplo	oyees,
3 Five hig	hest-paid independent contractors for professional services (see pag	e 23 of the instructions). If none	, enter "NONE."
•	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
			-
			<u> </u>
			<del> </del>
Total numb	per of others receiving over \$50,000 for professional services		· · · ▶ NONE
	Summary of Direct Charitable Activities		
Part IX-A	Summary of Direct Charitable Activities		
	ndation's four largest direct charitable activities during the tax year. Include relevant statistics	al information such as the number	Expenses
of organiza	ions and other beneficiaries served, conferences convened, research papers produced, etc		
1 <u>N/A</u> ,	THE FOUNDATION MAKES GRANTS TO VARIOUS NON-PRO	FIT	
	<u>NIZATIONS, FOCUSING ON THOSE THAT BENEFIT CONSE</u>	RVATION,	
	ATION, AND PUBLIC HEALTH.		NO NE
2			
3			<del> </del>
<b>3</b>			
4			
	Summary of Program-Related Investments (see page 23 of the		
Describe th	e two largest program-related investments made by the foundation during the tax year on line	es 1 and 2	Amount
1 NONE			
		·	
2			]
	<del></del>		
All other se	and the discount of the second		<del></del>
	ogram-related investments See page 24 of the instructions		
a <sup>™</sup> nōйĒ			
T-4-1 A 1.1			<del> </del>

	20-042302		
Pa	Minimum Investment Return (All domestic foundations must complete this part. For see page 24 of the instructions.)	reign founda	tions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	_   1a	3,691,020.
b		1b	91,911.
C		1 c	43,843.
d	<b>—</b>	1d	3,826,774.
е			
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	3,826,774.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25		-
		4	57,402.
5	of the instructions)  Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	3,769,372.
6	Minimum investment return. Enter 5% of line 5	. 6	188,469.
Pa	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) p	rivate operating	
	foundations and certain foreign organizations check here > and do not complete the		
1	Minimum investment return from Part X, line 6	1	188,469.
2 a	Tax on investment income for 2008 from Part VI, line 5	6.	
b			
С	Add lines 2a and 2b	2c	696.
3	Add lines 2a and 2b  Distributable amount before adjustments Subtract line 2c from line 1	. 3	187,773.
4	Recoveries of amounts treated as qualifying distributions	4	
5			187,773.
6	Add lines 3 and 4  Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	187,773.
Ра	art XII Qualifying Distributions (see page 25 of the instructions)		
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	2, 392, 543.
b			NONE
2	Program-related investments - total from Part IX-B  Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.	· · <del>   </del>	
		2	NONE
3	purposes  Amounts set aside for specific charitable projects that satisfy the	' •	
а		3a	NONE
b		3b	NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	2,392,543.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment incom-		
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	i I	696
6	Adjusted qualifying distributions. Subtract line 5 from line 4	• • <del></del>	2, 391, 847.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		
	qualifies for the section 4940(e) reduction of tax in those years	•	

Рa	rt XIII Undistributed Income (see page	26 of the instruction	ns)		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2008 from Part XI,	Corpus	Years prior to 2007	2007	2008
	line 7				187,773.
2	Undistributed income, if any, as of the end of 2007				
а	Enter amount for 2007 only				
b	Total for pnor years 20,20,20				
3	Excess distributions carryover, if any, to 2008				
а	From 2003 NONE				
b	From 2004 NONE				
	From 2005 NONE				
d	From 2006 NONE				
е	From 2007				
f	Total of lines 3a through e	471,180.		·····	
4	Qualifying distributions for 2008 from Part XII,				
	line 4 ▶ \$2, 392, 543.				
а	Applied to 2007, but not more than line 2a				
b	Applied to undistributed income of prior years (Election				
	required - see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election				
	required - see page 26 of the instructions)				
d	Applied to 2008 distributable amount				187,773.
е	Remaining amount distributed out of corpus	2,204,770.			
5	Excess distributions carryover applied to 2008				
	(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:				
	Corpus Add lines 3f, 4c, and 4e. Subtract line 5	2,675,950.			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b Enter the amount of prior years' undistributed				
·	income for which a notice of deficiency has been				
	issued, or on which the section 4942(a) tax has				
	been previously assessed				
d	Subtract line 6c from line 6b. Taxable				
e	amount - see page 27 of the instructions Undistributed income for 2007 Subtract line				
	4a from line 2a. Taxable amount - see page				
	27 of the instructions				
f	Undistributed income for 2008 Subtract lines				
	4d and 5 from line 1. This amount must be distributed in 2009				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)				
8	Excess distributions carryover from 2003 not	-			
	applied on line 5 or line 7 (see page 27 of the instructions)	NONE			
9	Excess distributions carryover to 2009.		-		
•	Subtract lines 7 and 8 from line 6a	2,675,950.			
10	Analysis of line 9				
	Excess from 2004 NONE				
	Excess from 2005 NONE				1
	Excess from 2006 NONE				
	Excess from 2007				
	Excess from 2008 2, 204, 770.				

Page 10

Form	1 990-PF (2008)				0429029	Page '
Pa	rt XIV `Private Opera	ating Foundations	(see page 27 of the	e instructions and Pa	art VII-A, question	9) NOT APPLICAB
1 a	If the foundation has r	eceived a ruling or	determination letter the	at it is a private ope	rating	
	foundation, and the ruling				<u> </u>	
b	Check box to indicate whe					42(j)(3) or 4942(j)(
		Tax year	T Programmy	Prior 3 years	<u> </u>	
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2008	(b) 2007	(c) 2006	(d) 2005	(e) Total
	f or the minimum investment	(4) 2000	(5) 2001	(0) 2 0 0 0	(0)2555	
	return from Part X for each					
	year listed	<del></del>				
b	85% of line 2a	· · · · · · · · · · · · · · · · · · ·	<del></del>	<del></del>		
C	Qualifying distributions from Part					
	XII, line 4 for each year listed					
a	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made					
	directly for active conduct of					
	exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the		·			
2	alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying					<del></del>
	under section					
ь	4942(j)(3)(B)(i)	<u>-</u> -		<del> </del>		<del>-   -</del> -
~	enter 2/3 of minimum invest-					
	ment return shown in Part X,					
_	line 6 for each year listed					<del></del>
С	"Support" alternative test - enter					
	(1) Total support other than gross investment income					
	(interest, dividends, rents,					
	payments on secunties loans (section 512(a)(5)),					
	or royalties)		<u> </u>			
	(2) Support from general					
	public and 5 or more exempt organizations as		1		1	}
	provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of sup-					
	port from an exempt					
	organization				<del> </del>	
Рa	rt XV Supplementa	ary Information (	Complete this part	only if the foundati	on had \$5,000 or	more in assets at ar
			je 27 of the instructi		. ,	
1	Information Regarding					<del></del>
а	List any managers of t	, ,		e than 2% of the tota	al contributions rec	eived by the foundati
	before the close of any					
	DAN A. EMM	emm				
<u> </u>			own 100/ or more o	f the stock of a corn	eration for an equi	ally lorge parties of the
D	List any managers of to ownership of a partners					ally large portion of the
	ownership of a partners	simp or other entity)	or writer the roundation	Thas a 10 % of greate	i iliterest	
2	N/ A Information Regarding	Camtribution Con	et Cift I aan Sahalara	hin etc. Drograma	<u> </u>	
2						
	Check here ► X If the					
	unsolicited requests for				e 28 of the instruc	ctions) to individuals
	organizations under oth	er conditions, comp	olete items 2a, b, c, and	<u>a</u>		· · · · · · · · · · · · · · · · · · ·
а	The name, address, ar	nd telephone numbe	r of the person to who	m applications should t	oe addressed	
	SEE STATEM	ENT 8				
b	The form in which appli	cations should be s	ubmitted and informati	on and materials they	should include	
	, ,			•		
	N/A					
С	Any submission deadling	nes	<del> </del>			
•	y Japinission deadiii					
	NI / TA					
	N/A				able Gelde Inc. 4.	-6 a 616411
d	Any restrictions or lin	nitations on award	s, such as by geogra	apnicai areas, charita	adie fields, kinds d	or oth
	factors					
	N/A					
JSA 90 1 (	000					Form <b>990-PF</b> (20

Part XV Supplementary Information (continued)  3 Grants and Contributions Paid During the Year or Approved for Future Payment					
	If recipient is an individual,	Foundation	[		
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)	or substantial contributor	recipient			
a Paid during the year					
SEE STATEMENT 9					
		†			
				1	
		1			
				ľ	
	-				
		ŀ			
				i	
Total			▶ 3a	2,384,182.	
b Approved for future payment					
2 · , p.p. · · · · · · · · · · · · · · · · ·					
				1	
		Ì			
		1			
		<u> </u>			
Total	<u></u>		▶ 3b		

Part XVI	-A Analysis of Income-Produ	icing Activ	vities			
Enter gross	amounts unless otherwise indicated	Unrela (a)	ated business income (b)	Excluded by	y section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program	n service revenue	Business code	Amount	Exclusion code	Amount	(See page 28 of the instructions)
a						
b						
С						
d						
е						
f						
g Fees	s and contracts from government agencies					<del> </del>
2 Member	rship dues and assessments					
	on savings and temporary cash investments			14	15, 113.	
	ds and interest from securities			14	54,511.	
	tal income or (loss) from real estate					·
	ot-financed property					
	debt-financed property					
	al income or (loss) from personal property .					
7 Other in	nvestment income			_		
•	(loss) from sales of assets other than inventory			18	-456,655.	
9 Net inco	ome or (loss) from special events					
-	profit or (loss) from sales of inventory					
	evenue a					
b	<del></del>			<del>-</del>		
c		<u></u>				
d			<del></del>	<del>- </del>		
e			· · · · · · · · · · · · · · · · · · ·	<del>-  </del>		
	I. Add columns (b), (d), and (e)				<u>-387,031.</u>	
	dd line 12, columns (b), (d), and (e)			• • • • • •	<sup>13</sup>	<u>-387,03</u> 1.
Part XVI	heet in line 13 instructions on page 28 Relationship of Activities			vomnt Durn	00000	
	<del></del>		<del></del>		· · · · · · · · · · · · · · · · · · ·	terbusha di ummandandhi sta
Line No. ▼	Explain below how each activithe accomplishment of the for page 28 of the instructions.)					
	NOT APPLICABLE	<del></del>		<del></del>	<del></del>	
	NOT APPLICABLE		<del></del>		<del></del>	
	·	<del></del>	<del></del>		·	<del></del>
	· · · · · · · · · · · · · · · · · · ·		<del></del>			
	· · · · · · · · · · · · · · · · · · ·	<del></del> .				<del></del>
		<del></del>				
	<del>                                     </del>	<del></del>		<del>.</del>	<del></del>	<del></del>
		<del></del>	<del></del>	-		
	<del></del>		<del></del>			
	<del></del>		<del></del>		<del></del>	<del></del>
			<del></del>		· — . — —	<del></del>
	<del>  </del>				<del></del>	<del></del>
						<del></del>
				<u> </u>		<del></del>
					<del> </del>	
	-		<del></del>			
			<del> </del>		<del></del>	
	· · · · · · · · · · · · · · · · · · ·				· · · · · · · · · · · · · · · · · · ·	
			<del></del>			
	-		<del></del>			<del></del>

VAN

15760 VENTURA BLVD., SUITE #1700

HOLTHOUSE CARLIN &

ÍRIGT

91436

Phone no. 818-849-3140 Form 990-PF (2008)

P00230294

EIN ▶ 95-4345526

signature

and ZIP code

Firm's name (or yours if

self-employed), address,

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

or 990-PF)
Department of the Treasury
Internal Revenue Service
Name of the organiz

## **Schedule of Contributors**

► Attach to Form 990, 990-EZ, and 990-PF.

OMB No 1545-0047

2008

Name of the organization		Employer identification number
EMMETT FOUNDATION		00.040000
Organization type (check or	ne)	20-0429029
-		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a priv	ate 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 organizations	es for both the General Rule and a Special Rule. See instructions.)  filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5, y one contributor Complete Parts I and II.	000 or more (in money or
Special Rules		
under sections 50	(c)(3) organization filing Form 990, or Form 990-EZ, that met the 331/3 (9(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during 000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the I and II.	the year, a contribution of the
during the year, a	(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that reggregate contributions or bequests of more than \$1,000 for use exclusion or educational purposes, or the prevention of cruelty to children or ani	ively for religious, charitable,
during the year, s not aggregate to the year for an exc applies to this org	(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that rome contributions for use exclusively for religious, charitable, etc., purpmore than \$1,000 (If this box is checked, enter here the total contributions religious, charitable, etc., purpose Do not complete any of the panization because it received nonexclusively religious, charitable, etc.,	ooses, but these contributions did tions that were received during parts unless the <b>General Rule</b> contributions of \$5,000 or more
990-EZ, or 990-PF), but they	are not covered by the General Rule and/or the Special Rules do not figure answer "No" on Part IV, line 2 of their Form 990, or check the bof their Form 990-PF, to certify that they do not meet the filing requirem	pox in the heading of their
For Privacy Act and Paperwork Re	eduction Act Notice, see the Instructions Sc	hedule B (Form 990, 990-EZ, or 990-PF) (2008)

for Form 990. These instructions will be issued separately.

Page_	of	of Part I

lame o	f organization	EMMETT	FOUND	ATION

Employer identification number 20-0429029

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
1_	DAN EMMETT		Person X Payroll
	808 W. WILSHIRE BLVD. SUITE 200	\$ 100,000.	Noncash
	SANTA MONICA, CA 90401		(Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	DAN EMMETT		Person X Payroll
	808 W. WILSHIRE BLVD. SUITE 200	\$ 360,646.	Noncash X
	SANTA MONICA, CA 90401		(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	DAN EMMETT		Person X
	808 W. WILSHIRE BLVD. SUITE 200	· \$206,546.	Payroll X
	SANTA MONICA, CA 90401		(Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll
		\$	Noncash 📖
ļ			(Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(Complete Part II if there is
		(c)	(Complete Part II if there is a noncash contribution )  (d) Type of contribution  Person Payroll Noncash (Complete Part II if there is
	Name, address, and ZIP + 4	(c) Aggregate contributions  \$\$	(Complete Part II if there is a noncash contribution )  (d) . Type of contribution  Person Payroll Noncash  (Complete Part II if there is a noncash contribution )
		(c) Aggregate contributions	(Complete Part II if there is a noncash contribution )  (d) Type of contribution  Person Payroll Noncash (Complete Part II if there is
No.	Name, address, and ZIP + 4  (b)	(c) Aggregate contributions  \$	(Complete Part II if there is a noncash contribution )  (d) Type of contribution  Person Payroll Noncash (Complete Part II if there is a noncash contribution )

e\_\_\_\_ of \_\_\_ of Part II

Name of organization EMMETT FOUNDATION

Employer identification number

20-0429029

). 	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date receive
117,	500 SHARES OF DOUGLAS EMMETT STOCK			12/16/222
		\$_	1,498,225.	12/16/2008
o. 1	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date receive
80,0	00 SHARES OF DOUGLAS EMMETT STOCK			
		\$_	1,103,200.	11/25/2009
). 	(b)  Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date receive
_				
		\$		
). 	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date receive
_		_		
		\$_		
). 	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date receive
_				
		\$_		
). 	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date receive
		_		

C	APITAL GA	INS AND LO	122E2 LOI	K TAX UNI	MAE211	VI PI		l
Kın'd of	Property		Desci	ription		or D	Date acquired	Date sold
Gross sale	Depreciation	Cost or	FMV	Adj basis	Excess of	۲	Gain	
price less expenses of sale	allowed/ allowable	other basis	as of 12/31/69	as of 12/31/69	FMV over adı basıs	$\  \ $	or (loss)	
expenses or sale	allowable	Uasis	12/3/1/09		401 24015	П		
		TOTAL CAPITA	AL GAIN DIS	rri buti ons			31,426.	
						П		
		104,568 SHA			r FUND	P	12/31/2007	05/08/2009
		PROPERTY TYPE	PE: SECURIT	I ES			400 001	İ
306, 533.		1,794,614.				H	-488,081.	
MOMAT CATALL	000)				·	H	-456,655.	
TOTAL GAIN(I	.055)					Н	=========	
						1		
								1
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1								
		1				1_		

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS 

ADJUSTED NET INCOME	15,036.	15,113.
NET INVESTMENT INCOME	15,036.	15,113.
REVENUE AND EXPENSES PER BOOKS	76. 15,036. 1.	15,113.
		TOTAL
DESCRIPTION	WELLS FARGO UBS SMITH BARNEY	

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES 

ADJUSTED NET INCOME	20,750.	       
NET INVESTMENT INCOME	20,750.	- 11
REVENUE AND EXPENSES PER BOOKS	750.	54,511.
		TOTAL
DESCRIPTION	SPECIALTY TRUST TIFF	

STATEMENT

FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES		8,276.	8,276.
ADJUSTED NET INCOME			NONE NONE NO NE
NET INVESTMENT INCOME		NONE	NONE
REVENUE AND EXPENSES PER BOOKS		8,276.	8,276.
			TOTALS
DESCRIPTION		ACCOUNTING FEES	

 $^{\circ}$ 

- TAXES	
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CHARITABLE PURPOSES	NONE	10.	75.	85.
ADJUSTED NET INCOME	NONE	NONE	NONE	NONE
NET INVESTMENT INCOME	NONE	NONE	NONE	NONE
REVENUE AND EXPENSES PER BOOKS	2.295.	10.	75.	2,380.
	FEDERAL TAXES	STATE TAXES	REGISTRY OF CHARITABLE TRUSTS	TOTALS

FORM 990PF,	PART II -	OTHER N	OTES AND	LOANS	RECEI VABLE

SPECIALTY TRUST, INC. 250,000. 8.500000 07/20/2006 BORROWER:

ORIGINAL AMOUNT: INTEREST RATE:

DATE OF NOTE:

PURPOSE OF LOAN: INVESTMENT

BEGINNING BALANCE DUE .....

250,000.

ENDING BALANCE DUE .....

NONE

ENDING FAIR MARKET VALUE .....

BORROWER:

SPECIALTY TRUST, INC.

ORIGINAL AMOUNT:

250,000.

INTEREST RATE:

250**,** 8.000000 8.000000 12/20/2006

DATE OF NOTE: MATURITY DATE:

12/20/2011

PURPOSE OF LOAN: INVESTMENT

BEGINNING BALANCE DUE .....

250,000.

ENDING BALANCE DUE .....

NONE

ENDING FAIR MARKET VALUE .....

NONE

TOTAL BEGINNING OTHER NOTES AND LOANS RECEIVABLE

500,000. 

TOTAL ENDING BOOK - OTHER NOTES AND LOANS RECEIVABLE

NONE 

TOTAL ENDING FMV - OTHER NOTES AND LOANS RECEIVABLE

NONE ============

FORM 990PF, PART II - CORPORATE STOCK 

ENDING FMV | | | BOOK VALUE ENDING

4,691,814. 4,691,814. 3,745,332. 3,745,332. 

TOTALS

CORPORATE STOCKS - VARIOUS

DESCRIPTION

9

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION
DIRECTOR &
DIRECTOR,
DIRECTOR, VP & ASST. SECRETARY
DIRECTOR,
DRCTR, VP, ASST. SEC.
DIRECTOR
GRAND TOTALS

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS 

N/A

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		•
RECIPIENT NAME AND ADDRESS	AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
HARVARD UNIVERSITY 1563 MASSACHUSETTS AVE. CAMBRIDGE, MA 02138	NONE 501 (C) (3)	TO BENEFIT EDUCATION	162,000.
ENVIRONMENTAL DEFENSE CENTER 906 GARDEN STREET SANTA BARBARA, CA 93101	NONE 501 (C) (3)	TO BENEFIT ENVIRONMENTAL EDUCATION	10,000.
SANTA BARBARA CHANNELKEEPER 714 BOND AVE SANTA BARBARA, CA 93103	NONE 501 (C) (3)	TO BENEFIT CHARITABLE ENDEAVORS TO PRESERVE THE SANTA BARBARA CHANNEL	5,000.
WINDOWS ON OUR WATERS 58 HIGH MEADOW LANE MYSTIC, CT 06355	NONE 501 (C) (3)	TO PROMOTE EDUCATION OF WATERSHED PROTECTION AND PRESERVATION	5,000.
STANFORD UNIVERSITY STANFORD, CA 94305	NONE 501 (C) (3)	TO BENEFIT EDUCATION	1,030,000.
UCLA FOUNDATION 10920 WILSHIRE BLVD., SUITE 900	NONE 501 (C) (3)	TO BENEFIT EDUCATION	5,000.

LOS ANGELES, CA 90024

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ACCESS FUND P O. BOX 17010 BOULDER, CO 80308	NONE 501 (C) (3)	TO BENEFIT THE CONSERVATION OF THE CLIMBING ENVIRONMENT	1,000.
SOUTH FORK NATURAL HISTORY MUSEUM P.O. BOX 455 BRIDGEHAMPTON, NY 11932	NONE 501 (C) (3)	TO BENEFIT THE SOUTH FORK NATURAL HISTORY MUSEUM & NATURE CENTER	10,000.
CALIFORNIA STATE PARKS FOUNDATION 714 W. OLYMPIC BLVD., SUITE 717 LOS ANGELES, CA 90015	NONE 501 (C) (3)	TO BENEFIT CHARITABLE ENDEAVORS TO PRESERVE THE NATURAL ENVIRONMENT	5,000.
OJAI VALLEY SCHOOL 723 EL PASEO ROAD OJAI, CA 93023	NONE 501(C)(3)	TO BENEFIT EDUCATION	1,000.
UNIVERSITY OF NEW HAMPSHIRE DURHAM, NH 03824	NONE 501 (C) (3)	TO BENEFIT EDUCATION	10,000.
THE CENTER FOR PUBLIC INTEGRITY 910 17TH STREET, NW, SUITE 700 WASHINGTON, DC 20006	NONE 501 (C) (3)	TO PROMOTE PUBLIC AWARENESS	25, 000.

YEAR	1
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PAID	
FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR	
AND	
GRANTS	
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PART	
990PF,	
FORM	

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		,
RECIPIENT NAME AND ADDRESS	AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
YALE UNIVERSITY 149 ELM STREET NEW HAVEN, CT 06511	NONE 501(C)(3)	TO BENEFIT EDUCATION	310,000.
WATERKEEPER ALLIANCE 50 S. BUCKHOUT SUITE 302 IRVINGTON, NY 10533	NONE 501(C)(3)	TO PROMOTE CLEAN WATER AND EQUITABLE USE OF WATER RESOURCES	1,000.
HARVARD UNIVERSITY 1563 MASSACHUSETTS AVE. CAMBRIDGE, MA 02138	NONE 501 (C) (3)	TO BENEFIT EDUCATION	288,182.
CATE SCHOOL 1960 CATE MESA ROAD CARPINTERIA, CA 93013	NONE 501 (C) (3)	TO BENEFIT EDUCATION	500,000.
CATE SCHOOL 1960 CATE MESA ROAD CARPINTERIA, CA 93013	MONE 501(C)(3)	TO BENEFIT EDUCATION	5,000.
ELINGS PARK FOUNDATION P.O.BOX 30818, 1298 LAS POSITAS ROAD SANTA BARBARA, CA 93130	NONE 501 (C) (3)	TO BENEFIT CHARITABLE ENDEAVORS TO PRESERVE ELINGS PARK	1,000.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

PURPOSE OF GRANT OR CONTRIBUTION RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR FOUNDATION STATUS OF RECIPIENT RECIPIENT NAME AND ADDRESS

501 (C) (3)

MARINA DEL REY, CA 90292

SANTA MONICA BAYKEEPER 3100 WASHINGTON BLVD

2,384,182. 10,000. AMOUNT TO BENEFIT CHARITABLE ENDEAVORS TO PRESERVE THE TOTAL CONTRIBUTIONS PAID SANTA MONICA BAY

### SCHÉDULE D (Form 1041)

Department of the Treasury Internal Revenue Service Name of estate or trust

# **Capital Gains and Losses**

▶ Attach to Form 1041, Form 5227, or Form 990-T. See the separate instructions for Form 1041 (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092 \*

Employer identification number

2008

Second   Comparison   Compari		MMETT FOUNDATION				20-0429029		
Cample 100 shares 7% preferred of 72° Co)   Cample 100 shares 7%	_							<u> </u>
b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b  2 Short-term capital gain or (loss) from partnerships, S corporations, and other estates or trusts  3 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts  4 (losses page 4 of the instructions)  5 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts  6 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts  7 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts  8 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts  9 Capitall Long-term dapital Gains and Losses - Assets Held More Than One Year  (Example 100 shares 7% preferred of 72° Co)  (B) Date acquired (mo. day, yr)  (Example 100 shares 7% preferred of 72° Co)  (B) Date acquired (mo. day, yr)  (Capital gain of (loss) from partnerships, S corporations, and other estates or trusts  8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts  8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts  8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts  8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts  9 Capital gain distributions  10 Gain from Form 4797, Part I  11 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2007 Capital Loss  12 Carryover Worksheet  13 Carryover Worksheet  14 (1) Capital gain or (loss) from partnerships, S corporations, and other estates or trusts  15 Carryover Worksheet  16 Capital gain or (loss) from partnerships, S corporations, and other estates or trusts  17 Long-term gain or (loss) from partnerships, S corporations, and other estates or trusts  18 Capital gain distributions  19 Capital gain or (loss) from partnerships, S corporations, and other estates or trusts  19 Capital gain	Pai	rt   Short-Term Capital Gains and Lo	osses - Assets	Held One Ye	ar or Less	<del></del>		
b Enter the short-term gain or (loss) from Forms 4684, 6252, 6781, and 8824					(d) Sales pnce	(see page 4 of the		(f) Gain or (loss) for the entire year Subtract (e) from (d)
2 Short-term capital gain or (loss) from Porms 4684, 6252, 6781, and 8824  3 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts  4 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2007 Capital Loss Carryover Worksheet,  5 Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, column (3) on the back.  5 Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, column (3) on the back.  6 Vertil Long-Term Capital Gains and Losses - Assets Held More Than One Year  (a) Description of property (Example 100 shares 7% preferred of *Z** Co)  (b) Date acquired (c) Date sold (mo, day, yr)  (c) Date sold (mo, day, yr)  (d) Sales proce  (e) Cost or other basis (see page 4 of the share share of the entire share	1a			- '-				
2 Short-term capital gain or (loss) from Porms 4684, 6252, 6781, and 8824  3 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts  4 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2007 Capital Loss Carryover Worksheet,  5 Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, column (3) on the back.  5 Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, column (3) on the back.  6 Vertil Long-Term Capital Gains and Losses - Assets Held More Than One Year  (a) Description of property (Example 100 shares 7% preferred of *Z** Co)  (b) Date acquired (c) Date sold (mo, day, yr)  (c) Date sold (mo, day, yr)  (d) Sales proce  (e) Cost or other basis (see page 4 of the share share of the entire share		· · · · · · · · · · · · · · · · · · ·			<del> </del>			
2 Short-term capital gain or (loss) from Porms 4684, 6252, 6781, and 8824  3 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts  4 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2007 Capital Loss Carryover Worksheet,  5 Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, column (3) on the back.  5 Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, column (3) on the back.  6 Vertil Long-Term Capital Gains and Losses - Assets Held More Than One Year  (a) Description of property (Example 100 shares 7% preferred of *Z** Co)  (b) Date acquired (c) Date sold (mo, day, yr)  (c) Date sold (mo, day, yr)  (d) Sales proce  (e) Cost or other basis (see page 4 of the share share of the entire share						<del> </del>		
2 Short-term capital gain or (loss) from Porms 4684, 6252, 6781, and 8824  3 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts  4 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2007 Capital Loss Carryover Worksheet,  5 Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, column (3) on the back.  5 Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, column (3) on the back.  6 Vertil Long-Term Capital Gains and Losses - Assets Held More Than One Year  (a) Description of property (Example 100 shares 7% preferred of *Z** Co)  (b) Date acquired (c) Date sold (mo, day, yr)  (c) Date sold (mo, day, yr)  (d) Sales proce  (e) Cost or other basis (see page 4 of the share share of the entire share						<del> </del>		<del></del>
2 Short-term capital gain or (loss) from Porms 4684, 6252, 6781, and 8824  3 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts  4 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2007 Capital Loss Carryover Worksheet,  5 Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, column (3) on the back.  5 Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, column (3) on the back.  6 Vertil Long-Term Capital Gains and Losses - Assets Held More Than One Year  (a) Description of property (Example 100 shares 7% preferred of *Z** Co)  (b) Date acquired (c) Date sold (mo, day, yr)  (c) Date sold (mo, day, yr)  (d) Sales proce  (e) Cost or other basis (see page 4 of the share share of the entire share								
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2 Short-term capital gain or (loss) from Porms 4684, 6252, 6781, and 8824  3 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts  4 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2007 Capital Loss Carryover Worksheet,  5 Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, column (3) on the back.  5 Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, column (3) on the back.  6 Vertil Long-Term Capital Gains and Losses - Assets Held More Than One Year  (a) Description of property (Example 100 shares 7% preferred of *Z** Co)  (b) Date acquired (c) Date sold (mo, day, yr)  (c) Date sold (mo, day, yr)  (d) Sales proce  (e) Cost or other basis (see page 4 of the share share of the entire share	b	Enter the short-term gain or (loss), if any,	from Schedule D	-1, line 1b			1 b	
3 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 4 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2007 Capital Loss Carryover Worksheet 5 Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, column (3) on the back.  Fartil Long-Term Capital Gains and Losses - Assets Held More Than One Year  (a) Description of property (Example 100 shares 7% preferred of "Z" Co)  (b) Date acquired (c) Date sold (mo. day, yr)  (c) Date sold (mo. day, yr)  (d) Sales price (e) Cost or cities basis (see page 4 of the instructions)  (f) Gain or (loss) (f) Gain or (loss							2	
4 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2007 Capital Loss Carryover Worksheet  Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, column (3) on the back.  Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year  (Example 100 shares 7% preferred of "Z" Co)  (B) Date acquired (mo. day, yr)  (Capital The long-term gain or (loss), if any, from Schedule D-1, line 6b  b Enter the long-term gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824  7 Long-term capital gain or (loss) from partnerships, S corporations, and other estates or trusts  8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts  9 Capital gain distributions  9 31, 10 Gain from Form 4797, Part I 11 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2007 Capital Loss Carryover Worksheet Carryover Worksheet 12 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back.							,	
Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13.   Column (3) on the back   Southeast (4) Sales pince   Column (4) Sales pince   Column (6) Description of property   (b) Date acquired (mo . day, yr)   (c) Date sold (mo . day, yr)   (d) Sales pince   (e) Cost or other basis (see page 4 of the entire subtract (e) in the entir		Short-term capital loss carryover. Enter th	e amount, if any	, from line 9 of	the 2007 Capital Los	s	,	<del></del>
Long-Term Capital Gains and Losses - Assets Held More Than One Year  (a) Description of property (Example 100 shares 7% preferred of "Z" Co)  (b) Date acquired (mo , day, yr) (mo , day, yr)  (mo , day, yr) (d) Sales proce (see page 4 of the matriculous) (see page 4 of th	5	Net short-term gain or (loss). Combine lin	ies 1a through 4	ın column (f).	Enter here and on lir	ne 13,		<del> </del>
(a) Description of property (Example 100 shares 7% preferred of "Z" Co)  (b) Date acquired (mo, day, yr)  (c) Date sold (mo, day, yr)  (d) Sales price  (e) Date sold (mo, day, yr)  (e) Date sold (mo, day, yr)  (f) Gain or (to the entire subtract (e) file (mo, day, yr))  (g) Date acquired (mo, day, yr)  (e) Date sold (mo, day, yr)  (f) Date acquired (mo, day, yr)  (f) Gain or (to the entire subtract (e) file (mo, day, yr))  (f) Date acquired (mo, day, yr)  (f) Date acquired (mo, day, yr)  (f) Date acquired (se) page 4 of the subtract (e) file (mo, day, yr)  (f) Date acquired (mo, day, yr)  (f) Date acquired (se) page 4 of the subtract (e) file (mo, day, yr)  (f) Date acquired (se) page 4 of the subtract (e) file (mo, day, yr)  (f) Date acquired (se) page 4 of the subtract (e) file (mo, day, yr)  (f) Date acquired (se) page 4 of the subtract (e) file (mo, day, yr)  (f) Date acquired (mo, day, yr)  (f) Date acquir	_	column (3) on the back	<del> </del>	· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u> ▶    </u>	5	·
b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b.  Capital gain or (loss) from partnerships, S corporations, and other estates or trusts  Because of the capital gain or (loss) from partnerships, S corporations, and other estates or trusts  Capital gain distributions  Capital gain distributions  Capital gain of (loss) from Form 4797, Part I  Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2007 Capital Loss Carryover Worksheet  Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back.  12 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back.  15 Inter the long-term (see page 4 of the instructions)  (see page 4 of the instructions)  (subtract (e) file of the ansure (subtract (e) file of the subtract	Pa	Long-Term Capital Gains and Loss	es - Assets Held	7	ne Year	(a) Cost or other has	eie T	(f) Gain or (loss) for
b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b.  7 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824  8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts  9 Capital gain distributions  9 31,  10 Gain from Form 4797, Part I  11 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2007 Capital Loss Carryover Worksheet  11 (  Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back.  12 -456,					(d) Sales price	(see page 4 of the		the entire year Subtract (e) from (d)
Tong-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824  Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts  Capital gain distributions  Gain from Form 4797, Part I  Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2007 Capital Loss Carryover Worksheet  Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back.  12 —456,	6a							
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Tong-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824  Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts  Capital gain distributions  Gain from Form 4797, Part I  Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2007 Capital Loss Carryover Worksheet  Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back.  12 —456,						<del></del>	+	
8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts  9 Capital gain distributions  10 Gain from Form 4797, Part I  11 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2007 Capital Loss  Carryover Worksheet  11 C  Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back  12 —456,	b	Enter the long-term gain or (loss), if any, f	rom Schedule D-	1, line 6b			6b	-488,081.
9 Capital gain distributions  10 Gain from Form 4797, Part I  11 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2007 Capital Loss Carryover Worksheet  12 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back.	7	Long-term capital gain or (loss) from Form	ns 2439, 4684, (	6252, 6781, ar	nd 8824		7	
Gain from Form 4797, Part I Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2007 Capital Loss Carryover Worksheet Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back  10  11  12  -456,	8	Net long-term gain or (loss) from partners	hips, S corporat	ions, and other	estates or trusts		8	
Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2007 Capital Loss Carryover Worksheet  Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back	9	Capital gain distributions					9	31,426.
Carryover Worksheet  Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back		Gain from Form 4797, Part I					0	
12 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back	11	•	_					,
column (3) on the back	12	Net long-term gain or (loss). Combine line	s 6a through 11		Enter here and on h	ne 14a	1 (	
	-		_	, .		*	2	-456,655.
	For I							

Sched	iule D (Form 1041) 2008	•	•				Page 2
Par	Summary of Parts I and II  Caution: Read the instructions before completing this part.	rt		eficiaries' page 5)	(2) Est		(3) Total
12	Net short-term gain or (loss)	13	(666)	-			
	Net long-term gain or (loss):						
	Total for year	14a					-456,655.
h	Unrecaptured section 1250 gain (see line 18 of the wrksht)	14b					
	28% rate gain						
15	Total net gain or (loss). Combine lines 13 and 14a	15					-456,655.
Note	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Fort V, and do not complete Part IV If line 15, column (3), is a net loss, complete F	rm 990	T, Part I, III	ne 4a) If line ital Loss Car	es 14a and 1 Tyover Work	5, colu <b>sheet,</b>	ımn (2), are net gaıns, go as necessary
Pai	t IV Capital Loss Limitation						
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F	Part I, I	ne 4c, if a t	rust), the sr	naller of		
а						16	( 3,000.)
	The loss on line 15, column (3) or b \$3,000  If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page over Worksheet on page 7 of the instructions to figure your capital loss carryove	e 1, lii r	ne 22 (or Fo	orm 990-T, li	ne 34), is a	loss, c	complete the Capital Loss
	t V Tax Computation Using Maximum Capital Gains Rates	,,			â	4	. D. Alica Dadilliand
there Caut  E.  B.  Form	in 1041 filers. Complete this part only if both lines 14a and 15 in column	re tha ctions e gail	n zero <i>If</i> ns, or qua	lified divide	ends are ir	nclude	ed in income in Part I
	er line 14b, col (2) or line 14c, col. (2) is more than zero						
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	34)	. 17				
18	Enter the smaller of line 14a or 15 in column (2)						
	but not less than zero 18						
19	Enter the estate's or trust's qualified dividends						
	from Form 1041, line 2b(2) (or enter the qualified						
	dividends included in income in Part I of Form 990-T) 19						
20	Add lines 18 and 19						
21	If the estate or trust is filing Form 4952, enter the						
	amount from line 4g, otherwise, enter -0 ▶ 21						
22	Subtract line 21 from line 20 If zero or less, enter -0		22	· · · · · · · · · · · · · · · · · · ·			
23	Subtract line 22 from line 17. If zero or less, enter -0		23				
24	Enter the smaller of the amount on line 17 or \$2,200		24	<del></del>			
25	Is the amount on line 23 equal to or more than the amount on line 24						
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box						
	No. Enter the amount from line 23						
26	Subtract line 25 from line 24		26				
27	Are the amounts on lines 22 and 26 the same?		_				
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or li	ne 22	27				
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28				
	0.44 44 004 4 07						
29	Subtract line 28 from line 27					20	
30	Multiply line 29 by 15% (15)		lo for Foto	too and Tr		30	
31						31	
	the Schedule G instructions)	• • •					
32	Add lines 30 and 31					32	
33	Add lines 30 and 31	chedi	le for Esta	tes and Tr	usts (see	<u> </u>	
	the Schedule Ginstructions)					33	
34	Tax on all taxable income. Enter the smaller of line 32 or	ine 3		and on lin	 ne 1a of	<del></del> -	
	Schedule G, Form 1041 (or line 36 of Form 990-T)					34	

* (a) Description of property (Example 100 sh 7% preferred of "Z" Co )	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales pnce (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss Subtract (e) from
04,568 SHARES OF TIFF MULTI-ASSET FUND	12/31/2007	05/08/2009	1,306,533.	1,794,614.	488,08
·					
	<u> </u>				

Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side.

Employer identification number.