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Return of Private Foundation  
or Section 4947(a)(1) Nonexempt Charitable Trust  
Treated as a Private Foundation

2010

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

For calendar year 2010, or tax year beginning , and ending

G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return  
☐ Amended return ☐ Address change ☐ Name change

|                                                                                                                                                                                                                                                   |                                                                                                                                                  |                                                                                                                                                                              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Name of foundation<br><b>JAMS Foundation</b>                                                                                                                                                                                                      |                                                                                                                                                  | A Employer identification number<br><b>91-2147141</b>                                                                                                                        |
| Number and street (or P O box number if mail is not delivered to street address)<br><b>1920 Main Street, Suite 300</b>                                                                                                                            | Room/suite                                                                                                                                       | B Telephone number<br><b>(949) 224-1810</b>                                                                                                                                  |
| City or town, state, and ZIP code<br><b>Irvine, CA 92614</b>                                                                                                                                                                                      |                                                                                                                                                  | C If exemption application is pending, check here <input type="checkbox"/>                                                                                                   |
| H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation<br><input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation |                                                                                                                                                  | D 1. Foreign organizations, check here <input type="checkbox"/><br>2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> |
| I Fair market value of all assets at end of year<br>(from Part II, col. (c), line 16)<br>\$ <b>1,302,920.</b>                                                                                                                                     | J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual<br><input type="checkbox"/> Other (specify) _____ | E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>                                                                |
| (Part I, column (d) must be on cash basis.)                                                                                                                                                                                                       |                                                                                                                                                  | F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>                                                             |

| Part I Analysis of Revenue and Expenses<br>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) |  | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------|---------------------------|-------------------------|-------------------------------------------------------------|
| 1 Contributions, gifts, grants, etc., received                                                                                                      |  | 775,767.                           |                           | N/A                     |                                                             |
| 2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B                                                                  |  |                                    |                           |                         |                                                             |
| 3 Interest on savings and temporary cash investments                                                                                                |  |                                    |                           |                         |                                                             |
| 4 Dividends and interest from securities                                                                                                            |  | 31,316.                            | 31,316.                   |                         | Statement 1                                                 |
| 5a Gross rents                                                                                                                                      |  |                                    |                           |                         |                                                             |
| b Net rental income or (loss)                                                                                                                       |  |                                    |                           |                         |                                                             |
| 6a Net gain or (loss) from sale of assets not on line 10                                                                                            |  |                                    |                           |                         |                                                             |
| b Gross sales price for all assets on line 6a                                                                                                       |  |                                    |                           |                         |                                                             |
| 7 Capital gain net income (from Part IV, line 2)                                                                                                    |  |                                    | 0.                        |                         |                                                             |
| 8 Net short-term capital gain                                                                                                                       |  |                                    |                           |                         |                                                             |
| 9 Income modifications                                                                                                                              |  |                                    |                           |                         |                                                             |
| 10a Gross sales less returns and allowances                                                                                                         |  |                                    |                           |                         |                                                             |
| b Less Cost of goods sold                                                                                                                           |  |                                    |                           |                         |                                                             |
| c Gross profit or (loss)                                                                                                                            |  |                                    |                           |                         |                                                             |
| 11 Other income                                                                                                                                     |  |                                    |                           |                         |                                                             |
| 12 Total. Add lines 1 through 11                                                                                                                    |  | 807,083.                           | 31,316.                   |                         |                                                             |
| 13 Compensation of officers, directors, trustees, etc                                                                                               |  | 53,520.                            | 10,704.                   |                         | 42,816.                                                     |
| 14 Other employee salaries and wages                                                                                                                |  |                                    |                           |                         |                                                             |
| 15 Pension plans, employee benefits                                                                                                                 |  |                                    |                           |                         |                                                             |
| 16a Legal fees Stmt 2                                                                                                                               |  | 1,642.                             | 0.                        |                         | 1,642.                                                      |
| b Accounting fees Stmt 3                                                                                                                            |  | 3,513.                             | 703.                      |                         | 2,810.                                                      |
| c Other professional fees                                                                                                                           |  |                                    |                           |                         |                                                             |
| 17 Interest                                                                                                                                         |  |                                    |                           |                         |                                                             |
| 18 Taxes                                                                                                                                            |  |                                    |                           |                         |                                                             |
| 19 Depreciation and depletion                                                                                                                       |  |                                    |                           |                         |                                                             |
| 20 Occupancy                                                                                                                                        |  |                                    |                           |                         |                                                             |
| 21 Travel, conferences, and meetings                                                                                                                |  | 13,521.                            | 0.                        |                         | 13,521.                                                     |
| 22 Printing and publications                                                                                                                        |  | 6,419.                             | 1,284.                    |                         | 5,135.                                                      |
| 23 Other expenses Stmt 4                                                                                                                            |  | 66,899.                            | 884.                      |                         | 66,015.                                                     |
| 24 Total operating and administrative expenses. Add lines 13 through 23                                                                             |  | 145,514.                           | 13,575.                   |                         | 131,939.                                                    |
| 25 Contributions, gifts, grants paid                                                                                                                |  | 659,161.                           |                           |                         | 659,161.                                                    |
| 26 Total expenses and disbursements. Add lines 24 and 25                                                                                            |  | 804,675.                           | 13,575.                   |                         | 791,100.                                                    |
| 27 Subtract line 26 from line 12:                                                                                                                   |  |                                    |                           |                         |                                                             |
| a Excess of revenue over expenses and disbursements                                                                                                 |  | 2,408.                             |                           |                         |                                                             |
| b Net investment income (if negative, enter -0-)                                                                                                    |  |                                    | 17,741.                   |                         |                                                             |
| c Adjusted net income (if negative, enter -0-)                                                                                                      |  |                                    |                           | N/A                     |                                                             |

| Part II Balance Sheets      |                                                                                                                                  | Beginning of year | End of year    |                |
|-----------------------------|----------------------------------------------------------------------------------------------------------------------------------|-------------------|----------------|----------------|
|                             |                                                                                                                                  |                   | (a) Book Value | (b) Book Value |
| Assets                      | 1 Cash - non-interest-bearing                                                                                                    |                   |                |                |
|                             | 2 Savings and temporary cash investments                                                                                         | 174,379.          | 225,988.       | 225,988.       |
|                             | 3 Accounts receivable ▶<br>Less: allowance for doubtful accounts ▶                                                               |                   |                |                |
|                             | 4 Pledges receivable ▶<br>Less: allowance for doubtful accounts ▶                                                                |                   |                |                |
|                             | 5 Grants receivable                                                                                                              |                   |                |                |
|                             | 6 Receivables due from officers, directors, trustees, and other disqualified persons                                             |                   |                |                |
|                             | 7 Other notes and loans receivable ▶<br>Less: allowance for doubtful accounts ▶                                                  |                   |                |                |
|                             | 8 Inventories for sale or use                                                                                                    |                   |                |                |
|                             | 9 Prepaid expenses and deferred charges                                                                                          |                   |                |                |
|                             | 10a Investments - U.S. and state government obligations                                                                          |                   |                |                |
|                             | b Investments - corporate stock                                                                                                  |                   |                |                |
|                             | c Investments - corporate bonds                                                                                                  |                   |                |                |
|                             | 11 Investments - land, buildings, and equipment basis ▶<br>Less accumulated depreciation ▶                                       |                   |                |                |
|                             | 12 Investments - mortgage loans                                                                                                  |                   |                |                |
|                             | 13 Investments - other Stmt 5                                                                                                    | 1,140,912.        | 1,091,711.     | 1,076,932.     |
| Liabilities                 | 14 Land, buildings, and equipment: basis ▶<br>Less accumulated depreciation ▶                                                    |                   |                |                |
|                             | 15 Other assets (describe ▶)                                                                                                     |                   |                |                |
|                             | 16 Total assets (to be completed by all filers)                                                                                  | 1,315,291.        | 1,317,699.     | 1,302,920.     |
|                             | 17 Accounts payable and accrued expenses                                                                                         |                   |                |                |
|                             | 18 Grants payable                                                                                                                |                   |                |                |
|                             | 19 Deferred revenue                                                                                                              |                   |                |                |
| Net Assets or Fund Balances | 20 Loans from officers, directors, trustees, and other disqualified persons                                                      |                   |                |                |
|                             | 21 Mortgages and other notes payable                                                                                             |                   |                |                |
|                             | 22 Other liabilities (describe ▶)                                                                                                |                   |                |                |
|                             | 23 Total liabilities (add lines 17 through 22)                                                                                   | 0.                | 0.             |                |
| Net Assets or Fund Balances | Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/><br>and complete lines 24 through 26 and lines 30 and 31. |                   |                |                |
|                             | 24 Unrestricted                                                                                                                  |                   |                |                |
|                             | 25 Temporarily restricted                                                                                                        |                   |                |                |
|                             | 26 Permanently restricted                                                                                                        |                   |                |                |
|                             | Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/><br>and complete lines 27 through 31.   |                   |                |                |
|                             | 27 Capital stock, trust principal, or current funds                                                                              | 0.                | 0.             |                |
|                             | 28 Paid-in or capital surplus, or land, bldg., and equipment fund                                                                | 0.                | 0.             |                |
|                             | 29 Retained earnings, accumulated income, endowment, or other funds                                                              | 1,315,291.        | 1,317,699.     |                |
| Net Assets or Fund Balances | 30 Total net assets or fund balances                                                                                             | 1,315,291.        | 1,317,699.     |                |
|                             | 31 Total liabilities and net assets/fund balances                                                                                | 1,315,291.        | 1,317,699.     |                |

## Part III Analysis of Changes in Net Assets or Fund Balances

|                                                                                                                                                                 |   |            |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|---|------------|
| 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30<br>(must agree with end-of-year figure reported on prior year's return) | 1 | 1,315,291. |
| 2 Enter amount from Part I, line 27a                                                                                                                            | 2 | 2,408.     |
| 3 Other increases not included in line 2 (itemize) ▶                                                                                                            | 3 | 0.         |
| 4 Add lines 1, 2, and 3                                                                                                                                         | 4 | 1,317,699. |
| 5 Decreases not included in line 2 (itemize) ▶                                                                                                                  | 5 | 0.         |
| 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30                                                         | 6 | 1,317,699. |

**Part IV Capital Gains and Losses for Tax on Investment Income**

|                                                                                                                                    |      |                                                  |                                      |                                  |
|------------------------------------------------------------------------------------------------------------------------------------|------|--------------------------------------------------|--------------------------------------|----------------------------------|
| (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) |      | (b) How acquired<br>P - Purchase<br>D - Donation | (c) Date acquired<br>(mo., day, yr.) | (d) Date sold<br>(mo., day, yr.) |
| 1a                                                                                                                                 |      |                                                  |                                      |                                  |
| b                                                                                                                                  | NONE |                                                  |                                      |                                  |
| c                                                                                                                                  |      |                                                  |                                      |                                  |
| d                                                                                                                                  |      |                                                  |                                      |                                  |
| e                                                                                                                                  |      |                                                  |                                      |                                  |

|                       |                                            |                                                 |                                              |
|-----------------------|--------------------------------------------|-------------------------------------------------|----------------------------------------------|
| (e) Gross sales price | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>(e) plus (f) minus (g) |
| a                     |                                            |                                                 |                                              |
| b                     |                                            |                                                 |                                              |
| c                     |                                            |                                                 |                                              |
| d                     |                                            |                                                 |                                              |
| e                     |                                            |                                                 |                                              |

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

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

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7  
If (loss), enter -0- in Part I, line 7 } 2

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):  
If gain, also enter in Part I, line 8, column (c).  
If (loss), enter -0- in Part I, line 8 } 3

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

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

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

| (a)<br>Base period years<br>Calendar year (or tax year beginning in) | (b)<br>Adjusted qualifying distributions | (c)<br>Net value of noncharitable-use assets | (d)<br>Distribution ratio<br>(col. (b) divided by col. (c)) |
|----------------------------------------------------------------------|------------------------------------------|----------------------------------------------|-------------------------------------------------------------|
| 2009                                                                 | 694,534.                                 | 1,335,844.                                   | .519921                                                     |
| 2008                                                                 | 363,666.                                 | 927,751.                                     | .391987                                                     |
| 2007                                                                 | 305,344.                                 | 781,269.                                     | .390831                                                     |
| 2006                                                                 | 321,043.                                 | 375,947.                                     | .853958                                                     |
| 2005                                                                 | 354,334.                                 | 277,868.                                     | 1.275188                                                    |

|                                                                                                                                                                                |   |          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|----------|
| 2 Total of line 1, column (d)                                                                                                                                                  | 2 | 3.431885 |
| 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years | 3 | .686377  |
| 4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5                                                                                                 | 4 | 782,502. |
| 5 Multiply line 4 by line 3                                                                                                                                                    | 5 | 537,091. |
| 6 Enter 1% of net investment income (1% of Part I, line 27b)                                                                                                                   | 6 | 177.     |
| 7 Add lines 5 and 6                                                                                                                                                            | 7 | 537,268. |
| 8 Enter qualifying distributions from Part XII, line 4                                                                                                                         | 8 | 791,100. |

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

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

|                                                                                                                                                                                                                                        |    |   |      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|---|------|
| 1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1.<br>Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions) |    |   |      |
| b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b                                                                           |    | 1 | 177. |
| 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 | 0.   |
| 3 Add lines 1 and 2                                                                                                                                                                                                                    |    | 3 | 177. |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)                                                                                                                          |    | 4 | 0.   |
| 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-                                                                                                                                              |    | 5 | 177. |
| 6 Credits/Payments:                                                                                                                                                                                                                    |    |   |      |
| a 2010 estimated tax payments and 2009 overpayment credited to 2010                                                                                                                                                                    | 6a |   |      |
| b Exempt foreign organizations - tax withheld at source                                                                                                                                                                                | 6b |   |      |
| c Tax paid with application for extension of time to file (Form 8868)                                                                                                                                                                  | 6c |   |      |
| d Backup withholding erroneously withheld                                                                                                                                                                                              | 6d |   |      |
| 7 Total credits and payments. Add lines 6a through 6d                                                                                                                                                                                  | 7  |   | 0.   |
| 8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached                                                                                                                    | 8  |   |      |
| 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed                                                                                                                                                        | 9  |   | 177. |
| 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid                                                                                                                                           | 10 |   |      |
| 11 Enter the amount of line 10 to be: Credited to 2011 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>                                                                                                        | 11 |   |      |

**Part VII-A Statements Regarding Activities**

|                                                                                                                                                                                                                                                                                                                                           | Yes | No |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?                                                                                                                                                                   |     | X  |
| 1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?<br>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 |     | X  |
| c Did the foundation file Form 1120-POL for this year?                                                                                                                                                                                                                                                                                    |     | X  |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:<br>(1) On the foundation. <input type="checkbox"/> \$ 0. (2) On foundation managers. <input type="checkbox"/> \$ 0.                                                                                                                  |     |    |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ 0.                                                                                                                                                                    |     |    |
| 2 Has the foundation engaged in any activities that have not previously been reported to the IRS?<br>If "Yes," attach a detailed description of the activities.                                                                                                                                                                           | 2   | X  |
| 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes                                                                                                              | 3   | X  |
| 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?                                                                                                                                                                                                                                            | 4a  | X  |
| b If "Yes," has it filed a tax return on Form 990-T for this year?                                                                                                                                                                                                                                                                        | 4b  |    |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?<br>If "Yes," attach the statement required by General Instruction T.                                                                                                                                                                     | 5   | X  |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:<br>• By language in the governing instrument, or<br>• 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?<br>If "Yes," complete Part II, col. (c), and Part XV                                                                                                                                                                                                    | 7   | X  |
| 8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> CA                                                                                                                                                                                                         |     |    |
| 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 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV                                                                                    | 9   | X  |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses                                                                                                                                                                                                     | 10  | X  |

**Part VII-A Statements Regarding Activities** (continued)

|    |                                                                                                                                                                                                                                                                                                                                              |    |     |    |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|----|
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)                                                                                                                                                      | 11 |     | X  |
| 12 | Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?                                                                                                                                                                                                                        | 12 |     | X  |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?<br>Website address ► <u>http://www.jamsadr.com/jamsfoundation</u>                                                                                                                                                        | 13 | X   |    |
| 14 | The books are in care of ► <u>Julie Sager</u> Telephone no. ► <u>(949) 224-1810</u><br>Located at ► <u>1920 Main Street, Suite 300, Irvine, CA</u> ZIP+4 ► <u>92614</u>                                                                                                                                                                      |    |     |    |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here<br>and enter the amount of tax-exempt interest received or accrued during the year                                                                                                                                                       | 15 | N/A |    |
| 16 | At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?<br>See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ► | 16 | Yes | No |
|    |                                                                                                                                                                                                                                                                                                                                              |    |     | X  |

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

|     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Yes | No |
|-----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1a  | During the year did the foundation (either directly or indirectly):                                                                                                                                                                                                                                                                                                                                                                                                                             |     |    |
| (1) | Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                          |     |    |
| (2) | Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                  |     |    |
| (3) | Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                      |     |    |
| (4) | Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                   |     |    |
| (6) | Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                 |     |    |
| b   | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?<br>Organizations relying on a current notice regarding disaster assistance check here                                                                                                                                                                       | N/A |    |
| 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 2010?                                                                                                                                                                                                                                                                                                         | 1c  | X  |
| 2   | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):                                                                                                                                                                                                                                                                                                                  |     |    |
| a   | At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If "Yes," list the years ►                                                                                                                                                                                                                                             |     |    |
| b   | Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)                                                                                                                                                                                | N/A |    |
| c   | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.<br>►                                                                                                                                                                                                                                                                                                                                                                           |     |    |
| 3a  | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                  |     |    |
| b   | If "Yes," did it have excess business holdings in 2010 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 2010.) | N/A |    |
| 4a  | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?                                                                                                                                                                                                                                                                                                                                                                                 | 4a  | X  |
| 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 2010?                                                                                                                                                                                                                                                               | 4b  | X  |

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (continued)**5a** During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☒ Yes ☐ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

Organizations relying on a current notice regarding disaster assistance check here

▶ ☐**5b****X****c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?**N/A**☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870.

**6b****X****7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?☐ Yes ☒ No**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?**N/A****7b****Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1** List all officers, directors, trustees, foundation managers and their compensation.

| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|----------------------|-----------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|
| See Statement 6      |                                                           | 53,520.                                   | 0.                                                                    | 0.                                    |
|                      |                                                           |                                           |                                                                       |                                       |
|                      |                                                           |                                           |                                                                       |                                       |
|                      |                                                           |                                           |                                                                       |                                       |
|                      |                                                           |                                           |                                                                       |                                       |
|                      |                                                           |                                           |                                                                       |                                       |
|                      |                                                           |                                           |                                                                       |                                       |
|                      |                                                           |                                           |                                                                       |                                       |
|                      |                                                           |                                           |                                                                       |                                       |

**2** Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---------------------------------------------------------------|-----------------------------------------------------------|------------------|-----------------------------------------------------------------------|---------------------------------------|
| NONE                                                          |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |

**Total** number of other employees paid over \$50,000**0**

Form 990-PF (2010)

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**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 |
|-------------------------------------------------------------|---------------------|------------------|
| NONE                                                        |                     |                  |
|                                                             |                     |                  |
|                                                             |                     |                  |
|                                                             |                     |                  |
|                                                             |                     |                  |
|                                                             |                     |                  |
|                                                             |                     |                  |

Total number of others receiving over \$50,000 for professional services

0

**Part IX-A** Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

|                                                                                                                                                                                    | Expenses |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 1 Grants to various recipients to visit the U.S. to study dispute resolution processes and practices to enable them to advance the resolution of disputes in their home countries. | 193,161. |
| 2 A grant was provided to provide conflict resolution training to pre-service and in-service teachers and administrators and develop support services.                             | 150,000. |
| 3                                                                                                                                                                                  |          |
| See Statement 7                                                                                                                                                                    | 50,000.  |
| 4 A grant to produce a series of animal stories teaching conflict resolution, cultural awareness, and anti-bullying lessons to pre-school through first grade students.            | 35,000.  |

**Part IX-B** Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

|                                                          | Amount |
|----------------------------------------------------------|--------|
| 1 N/A                                                    |        |
| 2                                                        |        |
| All other program-related investments. See instructions. |        |
| 3                                                        |        |
| Total. Add lines 1 through 3                             | 0.     |

Form 990-PF (2010)

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

|          |                                                                                                             |           |          |
|----------|-------------------------------------------------------------------------------------------------------------|-----------|----------|
| <b>1</b> | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: |           |          |
| <b>a</b> | Average monthly fair market value of securities                                                             | <b>1a</b> | 0.       |
| <b>b</b> | Average of monthly cash balances                                                                            | <b>1b</b> | 200,184. |
| <b>c</b> | Fair market value of all other assets                                                                       | <b>1c</b> | 594,234. |
| <b>d</b> | <b>Total</b> (add lines 1a, b, and c)                                                                       | <b>1d</b> | 794,418. |
| <b>e</b> | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)   | <b>1e</b> | 0.       |
| <b>2</b> | Acquisition indebtedness applicable to line 1 assets                                                        | <b>2</b>  | 0.       |
| <b>3</b> | Subtract line 2 from line 1d                                                                                | <b>3</b>  | 794,418. |
| <b>4</b> | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)   | <b>4</b>  | 11,916.  |
| <b>5</b> | <b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 | <b>5</b>  | 782,502. |
| <b>6</b> | <b>Minimum investment return.</b> Enter 5% of line 5                                                        | <b>6</b>  | 39,125.  |

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

|           |                                                                                                           |           |         |
|-----------|-----------------------------------------------------------------------------------------------------------|-----------|---------|
| <b>1</b>  | Minimum investment return from Part X, line 6                                                             | <b>1</b>  | 39,125. |
| <b>2a</b> | Tax on investment income for 2010 from Part VI, line 5                                                    | <b>2a</b> | 177.    |
| <b>b</b>  | Income tax for 2010. (This does not include the tax from Part VI.)                                        | <b>2b</b> |         |
| <b>c</b>  | Add lines 2a and 2b                                                                                       | <b>2c</b> | 177.    |
| <b>3</b>  | Distributable amount before adjustments. Subtract line 2c from line 1                                     | <b>3</b>  | 38,948. |
| <b>4</b>  | Recoveries of amounts treated as qualifying distributions                                                 | <b>4</b>  | 0.      |
| <b>5</b>  | Add lines 3 and 4                                                                                         | <b>5</b>  | 38,948. |
| <b>6</b>  | Deduction from distributable amount (see instructions)                                                    | <b>6</b>  | 0.      |
| <b>7</b>  | <b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | <b>7</b>  | 38,948. |

**Part XII Qualifying Distributions** (see instructions)

|          |                                                                                                                                   |           |          |
|----------|-----------------------------------------------------------------------------------------------------------------------------------|-----------|----------|
| <b>1</b> | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:                                        |           |          |
| <b>a</b> | Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26                                                     | <b>1a</b> | 791,100. |
| <b>b</b> | Program-related investments - total from Part IX-B                                                                                | <b>1b</b> | 0.       |
| <b>2</b> | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes                         | <b>2</b>  |          |
| <b>3</b> | Amounts set aside for specific charitable projects that satisfy the:                                                              |           |          |
| <b>a</b> | Suitability test (prior IRS approval required)                                                                                    | <b>3a</b> |          |
| <b>b</b> | Cash distribution test (attach the required schedule)                                                                             | <b>3b</b> |          |
| <b>4</b> | <b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4                 | <b>4</b>  | 791,100. |
| <b>5</b> | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b | <b>5</b>  | 177.     |
| <b>6</b> | <b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4                                                             | <b>6</b>  | 790,923. |

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII** Undistributed Income (see instructions)

|                                                                                                                                                                                   | (a)<br>Corpus | (b)<br>Years prior to 2009 | (c)<br>2009 | (d)<br>2010 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------|-------------|-------------|
| <b>1</b> Distributable amount for 2010 from Part XI, line 7                                                                                                                       |               |                            |             | 38,948.     |
| <b>2</b> Undistributed income, if any, as of the end of 2010                                                                                                                      |               |                            |             |             |
| <b>a</b> Enter amount for 2009 only                                                                                                                                               |               |                            | 0.          |             |
| <b>b</b> Total for prior years:                                                                                                                                                   |               | 0.                         |             |             |
| <b>3</b> Excess distributions carryover, if any, to 2010:                                                                                                                         |               |                            |             |             |
| <b>a</b> From 2005                                                                                                                                                                | 340,441.      |                            |             |             |
| <b>b</b> From 2006                                                                                                                                                                | 302,246.      |                            |             |             |
| <b>c</b> From 2007                                                                                                                                                                | 266,552.      |                            |             |             |
| <b>d</b> From 2008                                                                                                                                                                | 317,892.      |                            |             |             |
| <b>e</b> From 2009                                                                                                                                                                | 627,939.      |                            |             |             |
| <b>f</b> Total of lines 3a through e                                                                                                                                              | 1,855,070.    |                            |             |             |
| <b>4</b> Qualifying distributions for 2010 from Part XII, line 4: ► \$                                                                                                            | 791,100.      |                            |             |             |
| <b>a</b> Applied to 2009, but not more than line 2a                                                                                                                               |               |                            | 0.          |             |
| <b>b</b> Applied to undistributed income of prior years (Election required - see instructions)                                                                                    |               | 0.                         |             |             |
| <b>c</b> Treated as distributions out of corpus (Election required - see instructions)                                                                                            | 0.            |                            |             |             |
| <b>d</b> Applied to 2010 distributable amount                                                                                                                                     |               |                            |             | 38,948.     |
| <b>e</b> Remaining amount distributed out of corpus                                                                                                                               | 752,152.      |                            |             |             |
| <b>5</b> Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))                                         | 0.            |                            |             | 0.          |
| <b>6</b> Enter the net total of each column as indicated below:                                                                                                                   |               |                            |             |             |
| <b>a</b> Corpus: Add lines 3f, 4c, and 4e. Subtract line 5                                                                                                                        | 2,607,222.    |                            |             |             |
| <b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b                                                                                                         |               | 0.                         |             |             |
| <b>c</b> 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.                         |             |             |
| <b>d</b> Subtract line 6c from line 6b. Taxable amount - see instructions                                                                                                         |               | 0.                         |             |             |
| <b>e</b> Undistributed income for 2009. Subtract line 4a from line 2a. Taxable amount - see instr.                                                                                |               |                            | 0.          |             |
| <b>f</b> Undistributed income for 2010. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2011                                                              |               |                            |             | 0.          |
| <b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)                                                     | 0.            |                            |             |             |
| <b>8</b> Excess distributions carryover from 2005 not applied on line 5 or line 7                                                                                                 | 340,441.      |                            |             |             |
| <b>9</b> Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a                                                                                              | 2,266,781.    |                            |             |             |
| <b>10</b> Analysis of line 9:                                                                                                                                                     |               |                            |             |             |
| <b>a</b> Excess from 2006                                                                                                                                                         | 302,246.      |                            |             |             |
| <b>b</b> Excess from 2007                                                                                                                                                         | 266,552.      |                            |             |             |
| <b>c</b> Excess from 2008                                                                                                                                                         | 317,892.      |                            |             |             |
| <b>d</b> Excess from 2009                                                                                                                                                         | 627,939.      |                            |             |             |
| <b>e</b> Excess from 2010                                                                                                                                                         | 752,152.      |                            |             |             |

N/A

- b** Check box to indicate whether the foundation is a private operating foundation described in section

☐ 4942(1)(3) or ☐ 4942(1)(5)

- (4) Gross investment income**

[illegible]Form **990-PF** (2010)





## Part XVII

**Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

- |          |                                                                                                                                                                                                                                                                                                                                                                                              | Yes | No |
|----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| <b>1</b> | Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?                                                                                                                                          |     |    |
| <b>a</b> | Transfers from the reporting foundation to a noncharitable exempt organization of:                                                                                                                                                                                                                                                                                                           |     |    |
|          | (1) Cash                                                                                                                                                                                                                                                                                                                                                                                     |     | X  |
|          | (2) Other assets                                                                                                                                                                                                                                                                                                                                                                             |     | X  |
| <b>b</b> | Other transactions:                                                                                                                                                                                                                                                                                                                                                                          |     |    |
|          | (1) Sales of assets to a noncharitable exempt organization                                                                                                                                                                                                                                                                                                                                   |     | X  |
|          | (2) Purchases of assets from a noncharitable exempt organization                                                                                                                                                                                                                                                                                                                             |     | X  |
|          | (3) Rental of facilities, equipment, or other assets                                                                                                                                                                                                                                                                                                                                         |     | X  |
|          | (4) Reimbursement arrangements                                                                                                                                                                                                                                                                                                                                                               |     | X  |
|          | (5) Loans or loan guarantees                                                                                                                                                                                                                                                                                                                                                                 |     | X  |
|          | (6) Performance of services or membership or fundraising solicitations                                                                                                                                                                                                                                                                                                                       |     | X  |
| <b>c</b> | Sharing of facilities, equipment, mailing lists, other assets, or paid employees                                                                                                                                                                                                                                                                                                             |     | X  |
| <b>d</b> | If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. |     |    |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule.

| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
|--------------------------|--------------------------|---------------------------------|
| N/A                      |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |

**Sign  
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

Signature of officer or trustee

Date \_\_\_\_\_

**Treasurer**

Title

Print type preparer's name

Preparer's signature

Date

Check ☐ self-employed

|      |
|------|
| PTIN |
|------|

**Paid  
Preparer  
Use Only**

David R. Stephens

Firm's name ▶ **Stephens, Reidinger & Beller LLP**

Firm's address ► 1301 Dove Street, Suite 890  
Newport Beach, CA 92660

Firm's EIN ▶

Phone no. (949) 752-7400

Form **990-PF** (2010)

**Schedule B**(Form 990, 990-EZ,  
or 990-PF)Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**

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

OMB No 1545-0047

**2010**

Name of the organization

JAMS Foundation

Employer identification number

91-2147141

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)( ) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions**General Rule**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II

**Special Rules**

- ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ \_\_\_\_\_

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Name of organization

Employer identification number

JAMS Foundation

91-2147141

**Part I Contributors** (see instructions)

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                                 | (c)<br>Aggregate contributions | (d)<br>Type of contribution                                                                                                                                                  |
|------------|-----------------------------------------------------------------------------------|--------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1          | Alex Polsky<br>19346 Woodlands Lane<br>Huntington Beach, CA 92648                 | \$ 7,008.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)  |
| 2          | Charles Legge<br>521 Hawkridge Terrace<br>Orinda, CA 94563                        | \$ 5,714.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.) |
| 3          | Charles Vogel<br>326 S. Bentley Ave.<br>Los Angeles, CA 90049                     | \$ 9,056.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)  |
| 4          | Chris Poole<br>1819 Fairmount Ave.<br>La Canada, CA 91011                         | \$ 8,502.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)  |
| 5          | Daniel Weinstein<br>Two Embarcadero Center, Suite 1500<br>San Francisco, CA 94111 | \$ 200,000.                    | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)  |
| 6          | Dickran Tevrizian<br>1635 Lombardy Rd<br>Pasadena, CA 91106                       | \$ 6,241.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)  |

|                                                |                                                     |
|------------------------------------------------|-----------------------------------------------------|
| Name of organization<br><b>JAMS Foundation</b> | Employer identification number<br><b>91-2147141</b> |
|------------------------------------------------|-----------------------------------------------------|

**Part I Contributors** (see instructions)

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                  | (c)<br>Aggregate contributions | (d)<br>Type of contribution                                                                                                                                                  |
|------------|--------------------------------------------------------------------|--------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 7          | Edward Wallin<br>2045 S. State College Dr.<br>Anaheim, CA 92806    | \$ 5,803.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)  |
| 8          | Ellen James<br>123 Via Vaqueros<br>Martinez, CA 94553              | \$ 6,761.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.) |
| 9          | Fern Smith<br>3305 Washington St.<br>San Francisco, CA 94118       | \$ 7,051.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)  |
| 10         | Gary Taylor<br>29 Montclair<br>Irvine, CA 92602                    | \$ 7,538.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)  |
| 11         | Gerald Kurland<br>24317 Bridle Trail Rd.<br>Hidden Hills, CA 91302 | \$ 15,205.                     | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)  |
| 12         | James Smith<br>732 E Monroe Ave<br>Orange, CA 92687                | \$ 7,099.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.) |

|                                                |                                                     |
|------------------------------------------------|-----------------------------------------------------|
| Name of organization<br><b>JAMS Foundation</b> | Employer identification number<br><b>91-2147141</b> |
|------------------------------------------------|-----------------------------------------------------|

**Part I Contributors** (see instructions)

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                           | (c)<br>Aggregate contributions | (d)<br>Type of contribution                                                                                                                                                  |
|------------|-----------------------------------------------------------------------------|--------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 13         | Jams Inc.<br>1920 Main Street Suite 300<br>Irvine, CA 92614                 | \$ 25,000.                     | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)  |
| 14         | Jay Folberg<br>640 Davis St. #13<br>San Francisco, CA 94111                 | \$ 8,114.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.) |
| 15         | Jay Welsh<br>22222 Avenue of the Stars, Unit 21902<br>Los Angeles, CA 90067 | \$ 5,593.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)  |
| 16         | Jerry Spolter<br>147 San Carlos Ave<br>Sausalito, CA 94965                  | \$ 8,105.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)  |
| 17         | John Kennedy Jr<br>22165 Paseo del Sur<br>Laguna Beach, CA 92651            | \$ 9,234.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)  |
| 18         | John Trotter<br>1142 St. Regis Place<br>Santa Ana, CA 92705                 | \$ 11,998.                     | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)  |

|                                                |                                                     |
|------------------------------------------------|-----------------------------------------------------|
| Name of organization<br><b>JAMS Foundation</b> | Employer identification number<br><b>91-2147141</b> |
|------------------------------------------------|-----------------------------------------------------|

**Part I Contributors** (see instructions)

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                       | (c)<br>Aggregate contributions | (d)<br>Type of contribution                                                                                                                                                  |
|------------|-------------------------------------------------------------------------|--------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 19         | Linda Singer<br>3508 Springland Lane, NW<br>Washington, DC 20008        | \$ 6,038.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)  |
| 20         | Michael McAllister<br>245 Dorchester Rd.<br>River Edge, NJ 07661        | \$ 10,257.                     | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)  |
| 21         | Michael Young<br>145 Clinton Street, Second Floor<br>Brooklyn, NY 11201 | \$ 7,344.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)  |
| 22         | Read Ambler<br>260 Stratford Place<br>Los Altos, CA 94022               | \$ 6,458.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.) |
| 23         | Richard Chernick<br>962 Manning Ave.<br>Los Angeles, CA 90024           | \$ 11,331.                     | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)  |
| 24         | Richard Neal<br>1410 Hillcrest Ave.<br>Pasadena, CA 911064503           | \$ 11,332.                     | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.) |

Name of organization

Employer identification number

JAMS Foundation

91-2147141

**Part I Contributors** (see instructions)

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                       | (c)<br>Aggregate contributions | (d)<br>Type of contribution                                                                                                                                                  |
|------------|-------------------------------------------------------------------------|--------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 25         | Richard Neville<br>405 North Wabash, Apt. #4909<br>Chicago, IL 60611    | \$ 5,797.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)  |
| 26         | Richard Silver<br>89 Corona Rd.<br>Carmel Highlands, CA 93923           | \$ 13,964.                     | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)  |
| 27         | Robert Davidson<br>18 Justin Rd.<br>Harrison, NY 10528                  | \$ 10,161.                     | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.) |
| 28         | Robert Sabraw<br>P.O. Box 3116, 6900 Mill Creek Rd<br>Fremont, CA 94539 | \$ 7,382.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)  |
| 29         | Ross Feinberg<br>1855 Port Manleigh<br>Newport Beach, CA 92660          | \$ 10,227.                     | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)  |
| 30         | Stephen Crane<br>80 Park Ave. Apt 6-J<br>New York, NY 10016             | \$ 7,327.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.) |

|                                                |                                                     |
|------------------------------------------------|-----------------------------------------------------|
| Name of organization<br><b>JAMS Foundation</b> | Employer identification number<br><b>91-2147141</b> |
|------------------------------------------------|-----------------------------------------------------|

**Part I Contributors** (see instructions)

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                     | (c)<br>Aggregate contributions | (d)<br>Type of contribution                                                                                                                                                 |
|------------|-----------------------------------------------------------------------|--------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 31         | Steven Stone<br>31589 Saddletree Dr.<br>Westlake Village, CA 91361    | \$ 9,910.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution) |
| 32         | W. Scott Snowden<br>1478 Railroad Ave. Suite 4<br>St Helena, CA 94574 | \$ 8,423.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution) |
| 33         | William Cahill<br>88 King Street, #701<br>San Francisco, CA 94107     | \$ 13,546.                     | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution) |
| 34         | William Bettinelli<br>2017 Long Leaf Court<br>Santa Rosa, CA 95403    | \$ 5,419.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution) |
| 35         | Viggo Boserup<br>59 Old Course Drive<br>Newport Beach, CA 92660       | \$ 5,550.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution) |
| 36         | Bruce Edwards<br>1921 Mar West<br>Tiburon, CA 94920                   | \$ 6,000.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution) |

Name of organization

Employer identification number

JAMS Foundation

91-2147141

**Part I Contributors** (see instructions)

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                        | (c)<br>Aggregate contributions | (d)<br>Type of contribution                                                                                                                                                 |
|------------|----------------------------------------------------------|--------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 37         | Michael Loeb<br>135 Waldo Ave.<br>Piedmont, CA 94611     | \$ 6,571.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution) |
| 38         | James Melinson<br>130 Doral Drive<br>Blue Bell, PA 19422 | \$ 6,083.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution) |
| 39         | Jerry Roscoe<br>6909 Bonhem Court<br>McLean, VA 22101    | \$ 5,617.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution) |
| 40         | James Warren<br>1942 Eddy St.<br>San Francisco, CA 94115 | \$ 7,407.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution) |
|            |                                                          | \$                             | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)            |
|            |                                                          | \$                             | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)            |

Name of organization

Employer identification number

**JAMS Foundation****91-2147141****Part II Noncash Property** (see instructions)

| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
|------------------------------|----------------------------------------------|------------------------------------------------|----------------------|
|                              |                                              | \$                                             |                      |
|                              |                                              | \$                                             |                      |
|                              |                                              | \$                                             |                      |
|                              |                                              | \$                                             |                      |
|                              |                                              | \$                                             |                      |
|                              |                                              | \$                                             |                      |
|                              |                                              | \$                                             |                      |
|                              |                                              | \$                                             |                      |
|                              |                                              | \$                                             |                      |
|                              |                                              | \$                                             |                      |

Name of organization

Employer identification number

**JAMS Foundation****91-2147141****Part III**

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

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

|             |                                        |           |   |
|-------------|----------------------------------------|-----------|---|
| Form 990-PF | Dividends and Interest from Securities | Statement | 1 |
|-------------|----------------------------------------|-----------|---|

| Source                                    | Gross Amount | Capital Gains Dividends | Column (A) Amount |
|-------------------------------------------|--------------|-------------------------|-------------------|
| Investment Portfolio Interest & Dividends | 31,316.      | 0.                      | 31,316.           |
| Total to Fm 990-PF, Part I, ln 4          | 31,316.      | 0.                      | 31,316.           |

|             |            |           |   |
|-------------|------------|-----------|---|
| Form 990-PF | Legal Fees | Statement | 2 |
|-------------|------------|-----------|---|

| Description                | (a)<br>Expenses<br>Per Books | (b)<br>Net Invest-<br>ment Income | (c)<br>Adjusted<br>Net Income | (d)<br>Charitable<br>Purposes |
|----------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| Legal                      | 1,642.                       | 0.                                |                               | 1,642.                        |
| To Fm 990-PF, Pg 1, ln 16a | 1,642.                       | 0.                                |                               | 1,642.                        |

|             |                 |           |   |
|-------------|-----------------|-----------|---|
| Form 990-PF | Accounting Fees | Statement | 3 |
|-------------|-----------------|-----------|---|

| Description                  | (a)<br>Expenses<br>Per Books | (b)<br>Net Invest-<br>ment Income | (c)<br>Adjusted<br>Net Income | (d)<br>Charitable<br>Purposes |
|------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| Accounting                   | 3,513.                       | 703.                              |                               | 2,810.                        |
| To Form 990-PF, Pg 1, ln 16b | 3,513.                       | 703.                              |                               | 2,810.                        |

|             |                |           |   |
|-------------|----------------|-----------|---|
| Form 990-PF | Other Expenses | Statement | 4 |
|-------------|----------------|-----------|---|

| Description                     | (a)<br>Expenses<br>Per Books | (b)<br>Net Invest-<br>ment Income | (c)<br>Adjusted<br>Net Income | (d)<br>Charitable<br>Purposes |
|---------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| Miscellaneous                   | 4,422.                       | 884.                              |                               | 3,538.                        |
| Insurance                       | 1,220.                       | 0.                                |                               | 1,220.                        |
| Outside services                | 28,500.                      | 0.                                |                               | 28,500.                       |
| Weinstein Fellowship Napa Event | 32,757.                      | 0.                                |                               | 32,757.                       |
| To Form 990-PF, Pg 1, ln 23     | 66,899.                      | 884.                              |                               | 66,015.                       |

| Form 990-PF                            | Other Investments | Statement  | 5                 |
|----------------------------------------|-------------------|------------|-------------------|
| Description                            | Valuation Method  | Book Value | Fair Market Value |
| Investment Portfolio                   | COST              | 1,091,711. | 1,076,932.        |
| Total to Form 990-PF, Part II, line 13 |                   | 1,091,711. | 1,076,932.        |

| Form 990-PF | Part VIII - List of Officers, Directors<br>Trustees and Foundation Managers | Statement | 6 |
|-------------|-----------------------------------------------------------------------------|-----------|---|
|-------------|-----------------------------------------------------------------------------|-----------|---|

| Name and Address                                                                 | Title and<br>Avrg Hrs/Wk    | Compen-<br>sation | Employee<br>Ben Plan<br>Contrib | Expense<br>Account |
|----------------------------------------------------------------------------------|-----------------------------|-------------------|---------------------------------|--------------------|
| Richard Chenick<br>962 Manning Ave.<br>Los Angeles, CA 90024                     | Board Member<br>0.33        | 0.                | 0.                              | 0.                 |
| Chris Poole<br>1819 Fairmont Ave<br>La Canada, CA 91011                          | Board Member<br>0.33        | 0.                | 0.                              | 0.                 |
| Warren Knight<br>4 Chatham Ct.<br>Newport Beach, CA 926604209                    | Board Chairman<br>0.33      | 0.                | 0.                              | 0.                 |
| Jay Folberg<br>640 Davis St. #13<br>San Francisco, CA 94111                      | Executive Director<br>12.00 | 53,520.           | 0.                              | 0.                 |
| Julie Sager<br>20 Petria<br>Irvine, CA 92606                                     | Treasurer<br>0.67           | 0.                | 0.                              | 0.                 |
| John J. Welsh<br>10560 Whilshire Blvd., Unit 1702<br>Los Angeles, CA 90024       | Secretary<br>4.00           | 0.                | 0.                              | 0.                 |
| Daniel Weinstein<br>Two Embarcadero Center, Ste. 1500<br>San Francisco, CA 94111 | Board Member<br>0.33        | 0.                | 0.                              | 0.                 |
| Lourdes Baird<br>360 California Terrace<br>Pasadena, CA 91105                    | Board Member<br>0.33        | 0.                | 0.                              | 0.                 |

JAMS Foundation91-2147141

Michael Lewis,  
3508 Springland Lane, NW  
Washington, DC 20008

Board Member  
0.81

0. 0. 0.

Viggo Boserup  
59 Old Course Dr  
Newport Beach, CA 92660

Board Member  
0.33

0. 0. 0.

Bill Hartgering  
912 Michigan Ave., 3N  
Evanston, IL 60202

Board Member  
0.81

0. 0. 0.

Peter Woodin  
67 Montgomery Circle  
New Rochelle, NY 10804

Board Member  
0.81

0. 0. 0.

Totals included on 990-PF, Page 6, Part VIII

53,520.

0.

0.

Form 990-PF

Summary of Direct Charitable Activities

Statement

7

Activity Three

A grant to support the development of a 50-state compendium on court-ADR, providing comprehensive, up-to-date information and analysis on court-ADR programs, guidelines, and practices in state and federal courts nationwide.

Expenses

To Form 990-PF, Part IX-A, line 3

50,000.

Form 990-PF

Grants and Contributions  
Paid During the Year

Statement 8

| Recipient Name and Address                                                                                      | Recipient Relationship<br>and Purpose of Grant                                         | Recipient<br>Status                | Amount  |
|-----------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|------------------------------------|---------|
| ABA Section of Dispute<br>Resolution<br>740 15th Street Washington, DC<br>20005                                 | None<br>Develop & publish a<br>guide for judges &<br>court adminis                     | 501(c)(3)<br>Organizati            | 22,000. |
| Association for Conflict<br>Resolution<br>5151 Wisconsin Avenue, NW, Suite<br>500 Washington, DC 20005          | None<br>Support 2 regional<br>youth conferences                                        | Private<br>Foundation<br>501(c)(3) | 3,000.  |
| Cardozo School of Law<br>55 Fifth Avenue New York, NY<br>10003                                                  | None<br>Symposium on<br>environmental conflict<br>resolution &<br>publication.         | 501(c)(3)<br>Organizati            | 5,000.  |
| Center for African Peace &<br>Conflict Resolution, Sacramento<br>State - 6000 J. Street<br>Sacramento, CA 95819 | None<br>Conflict resolution &<br>peer mediation<br>training for st                     | 501(c)(3)<br>Organizati            | 20,000. |
| Center for Alternative Dispute<br>Resolution<br>7315 Hanover Parkway #C<br>Greenbelt, MD 20770                  | None<br>Research the history<br>and diversity in the<br>dispute resolution<br>field.   | 501(c)(3)<br>Organizati            | 9,000.  |
| Center for Nonviolent Education<br>and Parenting<br>P.O. Box 26938 Los Angeles, CA<br>90026                     | None<br>Pilot mediation<br>program for families<br>and caregivers.                     | 501(c)(3)<br>Organizati            | 7,000.  |
| Community Boards<br>3130 24th St. San Francisco, CA<br>94110                                                    | None<br>Conflict prevention<br>and anti-harassment<br>program regarding LGBT<br>youth. | 501(c)(3)<br>Organizati            | 3,000.  |
| Creative Mediation<br>285 South Street, Suite P San<br>Louis Obispo, CA 93401                                   | None<br>Elder mediation pilot<br>program                                               | 501(c)(3)<br>Organizati            | 2,000.  |

|                                                                                                                 |                                                                                            |                                    |         |
|-----------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|------------------------------------|---------|
| CRU Institute,<br>2330 130th Ave NE Bldg C, Suite<br>102 Bellevue, CA 98005                                     | None<br>Conflict resolution<br>stories for Pre-school<br>to 1st gr                         | Private<br>Foundation<br>501(c)(3) | 35,000. |
| Elna B. Spaulding Conflict<br>Resolution Center<br>634 Foster St. Durham, NC 27701                              | None<br>Pilot re-entry program<br>for incarcerated<br>persons preparing for<br>release.    | 501(c)(3)<br>Organizati            | 7,000.  |
| Kids Turn San Diego<br>23 Garden Street Cambrige, MA<br>02138                                                   | None<br>Training institutes to<br>introduce curriculum<br>for elem                         | Private<br>Foundation<br>501(c)(3) | 10,000. |
| Mediators Beyond Borders<br>3319 Rochambeau Ave Bronx, NY<br>10467                                              | None<br>Violence prevention &<br>intervention services<br>for scho                         | Private<br>Foundation<br>501(c)(3) | 25,000. |
| Hamline University School of Law<br>1536 Hewitt Ave Saint Paul, MN<br>55104                                     | None<br>Series of<br>international<br>conferences on<br>negotiation.                       | Private<br>Foundation<br>501(c)(3) | 10,000. |
| Recourse Mediation Services<br>520 Mendocino Ave Santa Rosa,<br>CA 95401                                        | None<br>Support recruitment &<br>training of Spanish<br>speaking mediators &<br>materials. | 501(c)(3)<br>Organizati            | 7,000.  |
| International Bar Association<br>10th Floor 1 Stephen Street<br>London W1T 1AT, UNITED KINGDOM                  | None<br>Launch the<br>BASESwiki.org website                                                | Internatio<br>org                  | 5,000.  |
| Morningside Center for Teaching<br>Social Responsibility<br>475 Riverside Dr. New York, NY<br>10115             | None<br>Introducing K-2<br>students to peer<br>mediators to lear<br>basics of mediation.   | 501(c)(3)<br>Organizati            | 3,000.  |
| National Association of<br>Community Mediations<br>1527 New Hampshire Ave. NW 4th<br>Floor Washington, DC 20036 | None<br>Revision and<br>distribution of<br>mediation publications<br>and webinars.         | 501(c)(3)<br>Organizati            | 35,000. |

JAMS Foundation91-2147141

|                                                                                         |                                                                                      |                                    |          |
|-----------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|------------------------------------|----------|
| Pepperdine University School of Law<br>24255 Pacific Coast Highway<br>Malibu, CA 90263  | None<br>Multi-day mediation training program for international judges.               | 501(c)(3)<br>Organizati            | 7,000.   |
| Resolution Systems Institute<br>11 E. Adams St, Suite 500<br>Chicago, IL 60603          | None<br>Court-related dispute regulation programs                                    | Private<br>Foundation<br>501(c)(3) | 50,000.  |
| Rational Games, Inc.<br>955 Massachusetts Ave. #274<br>Cambridge, MA 02139-3180         | None<br>Develop interactive video game to conflict resolution to young children.     | 501(c)(3)<br>Organizati            | 7,000.   |
| Seeds<br>1968 San Pablo Ave. Berkley, CA 94702                                          | None<br>Training workshops inunderserved neighborhoods to teach conflict resolution. | 501(c)(3)<br>Organizati            | 7,000.   |
| Temple University<br>1301 Cecil B. Moore Ave., Ritter Annex 2nd floor Boston, MA 02108  | None<br>Conflict resolution training for teachers                                    | Private<br>Foundation<br>501(c)(3) | 150,000. |
| Walnut Street Theater<br>825 Walnut St. Philadelphia, PA 19107                          | None<br>Series of performances providing lessons in conflict                         | 501(c)(3)<br>Organizati            | 10,000.  |
| Weinstein Fellowship Program<br>1920 Main St., Ste. 300 Irvine, CA 92614                | None<br>Advance dispute resolution in countries outside the                          | Fellowship<br>Grants               | 193,161. |
| Western Justice Center Foundation<br>55 South Grand Ave. Pasadena, CA 91105             | None<br>Pilot Project to mediate disputes of biased policing                         | 501(c)(3)<br>Organizati            | 2,000.   |
| W. Knight Distinguished Service Award - CAPCR<br>55 South Grand Ave. Pasadena, CA 91105 | None<br>Grant to support general Alternative Dispute Resolution programs.            | 501(c)(3)<br>Organizati            | 25,000.  |

Total to Form 990-PF, Part XV, line 3a

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659,161.

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box ☒ **X**

**Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

• If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1)

**Part II Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed)

|                                                                                              |                                                                                                              |                                |
|----------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|--------------------------------|
| Type or print<br><br>File by the extended due date for filing your return. See instructions. | Name of exempt organization                                                                                  | Employer identification number |
|                                                                                              | JAMS Foundation                                                                                              | 91-2147141                     |
|                                                                                              | Number, street, and room or suite no. If a P.O. box, see instructions<br>1920 Main Street, Suite 300         |                                |
|                                                                                              | City, town or post office, state, and ZIP code. For a foreign address, see instructions.<br>Irvine, CA 92614 |                                |

Enter the Return code for the return that this application is for (file a separate application for each return)

04

| Application Is For                       | Return Code | Application Is For | Return Code |
|------------------------------------------|-------------|--------------------|-------------|
| Form 990                                 | 01          |                    |             |
| Form 990-BL                              | 02          | Form 1041-A        | 08          |
| Form 990-EZ                              | 03          | Form 4720          | 09          |
| Form 990-PF                              | 04          | Form 5227          | 10          |
| Form 990-T (sec. 401(a) or 408(a) trust) | 05          | Form 6069          | 11          |
| Form 990-T (trust other than above)      | 06          | Form 8870          | 12          |

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

Julie Sager

• The books are in the care of ☒ 1920 Main Street, Suite 300 - Irvine, CA 92614

Telephone No. ☒ (949) 224-1810

FAX No. ☐

• If the organization does not have an office or place of business in the United States, check this box ☐

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3-month extension of time until November 15, 2011

5 For calendar year 2010, or other tax year beginning                     , and ending                     

6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return

☐ Change in accounting period

7 State in detail why you need the extension

Taxpayer requires additional time in order to compile all necessary information to file a complete and accurate return.

|    |                                                                                                                                                                                                                                   |    |    |    |
|----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|----|----|
| 8a | If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.                                                                                  | 8a | \$ | 0. |
| b  | If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868. | 8b | \$ | 0. |
| c  | <b>Balance due.</b> Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.                                                    | 8c | \$ | 0. |

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ☐

Title ☒ CPA

Date ☐

Form 8868 (Rev. 1-2011)