

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



### Form '990-PF

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

Department of the Treasury Internal Revenue Service

OMB No 1545-0052

Ford	alen	dar year 2011 or tax year begini	ning		, and ending	9		
Nar	ne of	foundation	-				A Employer identification	number
E	LL	MAN FOUNDATION					20-0896058	
		nd street (or P O box number if mail is	not delivered to street	address)	Roos	m/suite	B Telephone number	
2	85	O E CAMELBACK R	D, SUITE	110			602-840-30	00
City	or to	own, state, and ZIP code					C If exemption application is p	ending, check here
P	HO	ENIX, AZ 85016	j					
G C	heck	all that apply: Initial	return	Initial return of a f	ormer public charit	ty	D 1. Foreign organization:	s, check here
		Final r	eturn	Amended return			Favoran avanantations me	natura the 9594 test
			ss change	Name change			Foreign organizations me 2 check here and attach co	emputation
H_C	_	71 0	· · · · · · · · · · · · · · · · · · ·	empt private foundation			E If private foundation sta	
<u> </u>		ction 4947(a)(1) nonexempt char		Other taxable private found			under section 507(b)(1	)(A), check here
		arket value of all assets at end of y	· -	•	Accrual		F If the foundation is in a	
		Part II, col (c), line 16)		her (specify) mn (d) must be on cash	hasis I		under section 507(b)(1	)(B), check here
Po	rt I			1			(a) Advicted not	(d) Disbursements
[Pa	ru	(The total of amounts in columns (b), necessarily equal the amounts in columns	(c), and (d) may not	(a) Revenue and expenses per books	(b) Net investr income	ment	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc.,	received	60,000.			N/A	
	2	Check if the foundation is not rec	quired to attach Sch B					
	3	Interest on savings and temporary cash investments		1.		1.		STATEMENT 1
	4	Dividends and interest from secu	urities					
	5a	Gross rents						
	b	Net rental income or (loss)	· · · · · · · · · · · · · · · · · · ·					
e n		Net gain or (loss) from sale of assets n Gross sales price for all	ot on line 10					·
Revenue	, D	assets on line 6a  Capital gain net income (from Part IV, I	line 2)			0.		
æ	7 8	Net short-term capital gain	iii (6 2)			<u> </u>		
	9	Income modifications						
	-	Gross sales less returns and allowances						
		Less Cost of goods sold				_		
	C	Gross profit or (loss)	***********					
	11	Other income						
	12	Total. Add lines 1 through 11		60,001.		<u>1.</u>		
	13	Compensation of officers, directors, tri		0.		0.		0.
	14	Other employee salaries and wag						
S	15	Pension plans, employee benefit Legal fees	STMT 2	410.		410.		0.
Sus(		Accounting fees	STMT 3	2,541.	2	541.		0.
Expenses		Other professional fees				<u> </u>		
ě	17	Interest	RE	CEIVED				
ī <u>a</u>	18	Taxes	4	70				
Administrative	19	Depreciation and depletion	MA'	2 9 2012 S				
Ë	20	Occupancy	F F	<u> </u>				
Ă	21	Travel, conferences, and meeting	os OGI	NENI TITLE				
and	22	Printing and publications	Personal Control of the Control of t	100.		100.		
Operating	23	Other expenses	STMT 4	100.		100.		0.
e a	24	Total operating and administra expenses. Add lines 13 through		3,051.	3	051.		0.
Operat	25	Contributions, gifts, grants paid	120	56,837.		0011		56,837.
4	26	Total expenses and disburseme	ents.					
·1		Add lines 24 and 25		59,888.	3,	051.		56,837.
5	27	Subtract line 26 from line 12:						
-) *a	a	Excess of revenue over expenses and	disbursements	113.				
1	b	Net investment income (if negative				0.		
7	<u>C</u>	Adjusted net income (if negative,					N/A	5 000 DE /25
AND 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	-11	LHA For Paperwork Reduction	on Act Notice, see	instructions	1			Form <b>990-PF</b> (2011)
5	) E (	1 788537 19025	D.	2011.03050	I TI.I.M ልክ ውር	ירואוזר	MΩTΩN	19025B_1
±/294 (	, <b>5</b> (	)	υ U	Z011.03030 1	PATRICIA I	Y O TAILLY	11 1 014	1702JU_1

20-0896058 Form 990-PF (2011) ELLMAN FOUNDATION Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only Beginning of year End of year (b) Book Value (a) Book Value (c) Fair Market Value 1 Cash - non-interest-bearing 9,396. 9,509. 9,509. 2 Savings and temporary cash investments 3 Accounts receivable ▶ Less: allowance for doubtful accounts 4 Pledges receivable ► Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable 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 Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment; basis Less accumulated depreciation 15 Other assets (describe ▶ 9.396 9.509 9.509. 16 Total assets (to be completed by all filers) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe > 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Balances 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Fund **▶** X Foundations that do not follow SFAS 117, check here and complete lines 27 through 31 5 27 Capital stock, trust principal, or current funds Net Assets 0. 28 Paid-in or capital surplus, or land, bldg., and equipment fund 9,396. 9,509 29 Retained earnings, accumulated income, endowment, or other funds 9,396. 30 Total net assets or fund balances 9,396 9.509 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 30 9,396. (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 509. Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) 9,509. Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

123511 12-02-11

Part IV	Capital Gains a	nd Lo	sses for Tax on In	vestment	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>b</b> ) I	How ac - Purch - Dona	quired nase tion	c) Date a (mo., da	acquired ay, yr.)	(d) Date sold (mo., day, yr.)
1a				-							
b	NON	ΙE									
<u> </u>	<u> </u>		· · · · · · · · · · · · · · · · · · ·	<del></del>		-					
<u>d</u>											
e (e)	Gross sales price	(f) D	epreciation allowed (or allowable)		st or other basis					ain or (loss (f) minus (	
a			· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u> </u>						
<u> </u>								*			
С											
d											
e											
Compl	ete only for assets showing									ol. (h) gaın ıot less thaı	
(i) F.I	M.V. as of 12/31/69		) Adjusted basis as of 12/31/69		cess of col. (I) col. (J), If any					(from col. (	
a											
_b											
<u> </u>											
_d								<del></del>		_	
е			<i>C</i>	D		$\overline{}$	I				
	gain net income or (net cap		$ \begin{cases} \text{ If gain, also enter} \\ \text{ If (loss), enter -0} \end{cases} $	- ın Part I, lıne		}	2			<u>-</u>	
If gain, a	rt-term capital gain or (loss also enter in Part I, line 8, c			d (6):		}					
If (loss) Part V	, enter -0- in Part I, line 8	dor S	ection 4940(e) for	Reduced	Tay on Not	· Inv	3	ent Inco	me		
									,,,,,		
(For option	al use by domestic private t	roundatio	ns subject to the section 4	1940(a) tax on	net investment ir	ICOM	3.)				
If section 4	940(d)(2) applies, leave thi	s part bla	nk.								
Was the for	undation liable for the section	nn 4942 t	ax on the distributable am	injunt of any ve	ear in the base ne	riod?					Yes X No
	foundation does not qualif				•						
	ne appropriate amount in ea					es.					
	(a)		(b)			(c)				Distrit	(d) oution ratio
Calendar	Base periód years year (or tax year beginning	g in)	Adjusted qualifying dis	tributions	Net value of no	ncha			(col. (b) divided by col. (c))		rided by col. (c))
	2010			3,037.				8, <u>470</u>			7.442385
	2009			8,781.				8,259		_	10.749606
	2008			<u>5,289.</u>				2,530			77.189328
	2007			<u>3,095.</u>				3,605			12.722896
	2006		16	5,100.			<u> </u>	4,385	·		11.477233
	line 1, column (d)								2		119.581448
_	e distribution ratio for the 5- ndation has been in existence			on line 2 by 5,	or by the number	r of ye	ars		3		23.916290
4 Enter th	e net value of noncharitable	e-use ass	ets for 2011 from Part X,	line 5					4_		7,400.
5 Multiply	line 4 by line 3								5		176,981.
	% of net investment income	e (1% of I	Part I, line 27b)						6	-	0.
7 Add line		,	, , , , , , , , , , , , , , , , , , ,						7		176,981.
		Dort VII	uno A						8		56,837
•	ualifying distributions from			46			n/ .a	ata	_ <b>_</b>		20,031
	is equal to or greater than I	iine /, chi	eck the box in Part VI, line	ib, and comp	nete that part usif	ig a 1	7₀ tax r	alt.			

Form 990-PF (2011) ELLMAN FOUNDATION	5 4700 NA D		20-08960	58 ' Page 6
Part VII-B   Statements Regarding Activities for Which I	Form 4720 May Be I	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No	
(2) Influence the outcome of any specific public election (see section 4955); o	or to carry on, directly or indir		( <del></del>	
any voter registration drive?	_		es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es LXJ No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section	<del></del> 1		
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or			
the prevention of cruelty to children or animals?			es X No	
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		in Regulations	27/2	
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi				
expenditure responsibility for the grant?		1/A ∐ Y∈	es L No	
If "Yes," attach the statement required by Regulations section 53.494				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		[32] a.	
a personal benefit contract?		Y6	es X No	o.   37
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		<del> -</del>	6b X
If "Yes" to 6b, file Form 8870.	holter transaction?		es X No	
7a At any time during the tax year, was the foundation a party to a prohibited tax s b If "Yes," did the foundation receive any proceeds or have any net income attribute.		16		7b
Information About Officers Directors Trust		nagers Highly		<u>, n                                   </u>
Part VIII Paid Employees, and Contractors			•	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
( ) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address	to position	enter -0-)	and deferred compensation	allowances
	EXECUTIVE DIF	ECTOR		
2850 EAST CAMELBACK ROAD, SUITE 110		_	_	_
PHOENIX, AZ 85016	1.00	0.	0.	0.
	EXECUTIVE DIF	ÆCTOR		
2850 EAST CAMELBACK ROAD, SUITE 110	1 00			
PHOENIX, AZ 85016	1.00	0.	0.	0.
				· · ·
2 Compensation of five highest-paid employees (other than those inc	luded 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	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Nume and address of each employee paid more than \$\phi \cos \cos \cos \cos \cos \cos \cos \cos	devoted to position	(C) Compensation	and deterred compensation	allowances
NONE		,		
				<u> </u>
Total number of other employees paid over \$50,000			<b>•</b>	0
			Form 9	990-PF (2011)

Total, Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, se	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
Ь	Average of monthly cash balances	1b	7,513.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	7,513.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	7,51 <u>3</u> .
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	113.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	7,400.
6	Minimum investment return. Enter 5% of line 5	6	370.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here in and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	370.
2a	Tax on investment income for 2011 from Part VI, line 5		
b	Income tax for 2011. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	370.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	370.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	370.
P	art XII Qualifying Distributions (see instructions)	<u> </u>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	56,837.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	56,837.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		_
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	56,837.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years	qualifies for t	he section

Part XIII Undistributed Income (see instructions)

				/4\
	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,				
line 7				370.
2 Undistributed income, if any, as of the end of 2011			•	
a Enter amount for 2010 only			0.	
<b>b</b> Total for prior years:		0		
3 Excess distributions carryover, if any, to 2011:		0.		
a From 2006 164, 381.				
b From 2007 172, 415.				
c From 2008 195,162.				
d From 2009 88,368.				
e From 2010 62,613.				
f Total of lines 3a through e	682,939.			
4 Qualifying distributions for 2011 from				
Part XII, line 4: ► \$ 56,837.				
a Applied to 2010, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior		_		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.		· · · · · · · · · · · · · · · · · · ·	370.
d Applied to 2011 distributable amount	56,467.			370.
e Remaining amount distributed out of corpus	0.		-,· ·	0.
5 Excess distributions carryover applied to 2011 (if an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	739,406.			
<b>b</b> Prior years' undistributed income. Subtract		_		
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously		_		
assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2010. Subtract line			·	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2011. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2012				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.		<del></del>	
8 Excess distributions carryover from 2006	164 201			
not applied on line 5 or line 7	164,381.			
9 Excess distributions carryover to 2012 Subtract lines 7 and 8 from line 6a	575,025.			
10 Analysis of line 9:	313,023.			
a Excess from 2007 172, 415.				
b Excess from 2008 195, 162.				
c Excess from 2009 88,368.	Ì			
d Excess from 2010 62,613.				
e Excess from 2011 56, 467.				
				Form <b>990-PF</b> (2011)

Part XIV Private Operating F	FUUNDATION (see a	not western and Dort V	II A guestion O		J-0696036 Fage 10
		<del>.</del> .	II-A, question 9)	N/A	
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective fo		=	▶ ∟_	7 4040(1)(0)	
<b>b</b> Check box to indicate whether the found		ing foundation described		4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2011	(b) 2010	Prior 3 years (c) 2009	(d) 2008	(e) Total
income from Part I or the minimum	(a) 2011	(0) 2010	(6) 2003	(0) 2000	(6) 10(a)
investment return from Part X for					
each year listed			<del> </del>		
b 85% of line 2a		<del></del>			
c Qualifying distributions from Part XII,	}				
line 4 for each year listed					
d Amounts included in line 2c not	+				
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.	1				
Subtract line 2d from line 2c			-		
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:				-	
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Compl	ete this part only	if the foundation	on had \$5,000	or more in assets
at any time during t					
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh		e than 2% of the total cor	tributions received by t	he foundation before	the close of any tax
year (but only if they have contributed n	nore than \$5,000). (See	section 507(d)(2).)			
SEE STATEMENT 6					
b List any managers of the foundation wh			(or an equally large po	rtion of the ownersh	ip of a partnership or
other entity) of which the foundation ha	s a 10% or greater intere	est.			
NONE					
2 Information Regarding Contribut					
Check here ► X if the foundation of					
the foundation makes gifts, grants, etc.				complete items 2a,	b, c, and d.
a The name, address, and telephone num	ber of the person to who	om applications should b	e addressed:		
· · · · · · · · · · · · · · · · · · ·	<del></del>				<u> </u>
<b>b</b> The form in which applications should to	e submitted and inform	ation and materials they s	shonlq include.		
<del></del> _					
c Any submission deadlines:					
			Lundo of matrixities :	or other factors:	
d Any restrictions or limitations on award	s, such as by geographic	cai areas, charitable fields	i, kinas of institutions, (	or other factors:	
22801 12 02 11					Form <b>990-PF</b> (2011)

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or Foundation show any relationship to Amount contribution status of any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year PUBLIC CHARITY GENERAL USE ARIZONA ANIMAL WELFARE LEAGUE N/A 30 NORTH 40TH PLACE 1,000, PHOENIX, AZ 85034 PUBLIC CHARITY CIRCLE OF FRIENDS ARIZONA HUMANE SOCIETY N/A 9226 NORTH 13TH AVENUE 1,000. PHOENIX, AZ 85021 PUBLIC CHARITY GENERAL USE CAMELOT THERAPUETIC HORSEMANSHIP INC N/A 23623 NORTH SCOTTSDALE ROAD, D3-259 100. SCOTTSDALE, AZ 85255-3471 J. TERRENCE LANNI CANCER FOUNDATION N/A FOUNDATION GENERAL USE 1441 EASTLAKE AVENUE, NOR 8302 500. LOS ANGELES CA 90033 PUBLIC CHARITY GENERAL USE N/A LAGUNA ART MUSEUM 307 CLIFF DRIVE 125. LAGUNA BEACH CA 92651 SEE CONTINUATION SHEET(S) **▶** 3a 56 837. Total b Approved for future payment NONE <u> 3b</u> Total

nter gross amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded	by section 512, 513, or 514	(e)
inter gross amounts unless otherwise mulcated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	Tançaon income
a	_	·	<del>                                     </del>		······································
b	_				<del></del>
C			+ +		
d	_ <del>   </del>		+		
e					
g Fees and contracts from government agencies	<u> </u>		+ +-		
2 Membership dues and assessments			+	<del></del>	<del></del>
3 Interest on savings and temporary cash			14	1.	
Investments  A Dividende and interest from securities			1 4		
Dividends and interest from securities     Net rental income or (loss) from real estate:	-		+		
a Debt-financed property					
bet-inianced property     Not debt-financed property			1		
6 Net rental income or (loss) from personal					
property					
7 Other investment income					-
8 Gain or (loss) from sales of assets other					<del></del>
than inventory					
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a					
b					
c					
d	1 1				
e					
2 Subtotal. Add columns (b), (d), and (e)		0		1.	
3 Total. Add line 12, columns (b), (d), and (e)				13	

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).				
-					

123621 12-02-11

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations** Yes No 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? a Transfers from the reporting foundation to a noncharitable exempt organization of: X (1) Cash 1a(1) X 1a(2) (2) Other assets b Other transactions: X 1b(1) (1) Sales of assets to a noncharitable exempt organization 1b(2) (2) Purchases of assets from a noncharitable exempt organization 1b(3) (3) Rental of facilities, equipment, or other assets 1b(4) (4) Reimbursement arrangements X 1b(5) (5) Loans or loan guarantees X 16(6) (6) Performance of services or membership or fundraising solicitations X c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c 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. (c) Name of noncharitable exempt organization (b) Amount involved (d) Description of transfers, transactions, and sharing arrangements N/A2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No Yes in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A May the IRS discuss this return with the preparer Sign n below (se Here X Yes JNo Signature Date Title Check [ preparer's name Preparer's signature Date self- employed P00095761 Paid JAMES G. SEFF, CPA JAMES G. SEFF Preparer Firm's EIN ► 84-1133477 Firm's name ► THE SEFF GROUP, P.C. **Use Only** 

Form **990-PF** (2011)

(303) 394-2400

Phone no.

Firm's address ▶ 3250 E. 2ND AVENUE

DENVER, CO 80206-5204

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

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

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

OMB No 1545-0047

2011

**Employer identification number** Name of the organization 20-0896058 ELLMAN FOUNDATION 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 X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$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, total 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 total 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 Part I, 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) (2011)

Name of organization

Employer identification number

TOT T MANNT	FOUNDATIO:	N٦
CTTMAN	LOUNDATIO.	LN

20-0896058

Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	nal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	STEVE ELLMAN & KELLY ELLMAN  2850 EAST CAMELBACK ROAD, SUITE 110  PHOENIX, AZ 85016	\$60,000 <b>.</b>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		-     \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		-   \$ 	Person Payroll Oncash Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - \$	Person Payroll Oncash Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

#### ELLMAN FOUNDATION

20-0896058

Part II	Noncash Property (see instructions) Use duplicate copies of P	art II if additional space is needed	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-		\$	<u> </u>
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
- - - -		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
- - -		<b>\$</b>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-  -  -		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-  -  -		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-			
		\$	990, 990-EZ, or 990-PF) (2

ation		Employer identification number			
FOUNDATION Exclusively religious, charitable, etc., indiv	idual contributions to section 501(c)	20-0896058 (7), (8), or (10) organizations that total more than \$1,000 for the			
		ns completing Part III, enter the year. (Enter this information once)			
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift				
Transferee's name, address, an	nd ZIP + 4	Relationship of transferor to transferee			
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Transferee's name, address, ar	(e) Transfer of gift	Relationship of transferor to transferee			
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Transferee's name address ar	(e) Transfer of gift	Relationship of transferor to transferee			
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Transferee's name, address, an	nd ZIP + 4	Relationship of transferor to transferee			
	COUNDATION Exclusively religious, charitable, etc., indiversity religious, charitable, etc., indiversity religious, charitable, etc., indiversity religious, charitable, etc. Use duplicate copies of Part III if additions (b) Purpose of gift  Transferee's name, address, and (b) Purpose of gift	(e) Transferee's name, address, and ZIP + 4  (b) Purpose of gift  (c) Use of gift  Transferee's name, address, and ZIP + 4  (b) Purpose of gift  (c) Use of gift  (e) Transfer of gift  Transferee's name, address, and ZIP + 4  (e) Transfer of gift  Transferee's name, address, and ZIP + 4			

ELLMAN FOUNDATION

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor PUBLIC CHARITY GENERAL USE MARICOPA COUNTY SHERIFF'S N/A ORGANIZATION 3325 WEST DURANGO ROAD 350. PHOENIX, AZ 85009 PUBLIC CHARITY GENERAL USE MIZEL MUSEUM N/A 400 S. KEARNEY DENVER, CO 80224 10,000. PUBLIC CHARITY GENERAL USE MUSE NORRIS HOSPICE N/A 232 2ND STREET SE 200. MASON CITY, IA 50401 PUBLIC CHARITY GENERAL USE N/A PHOENIX ART MUSEUM 1625 NORTH CENTRAL AVE 41,999, PHOENIX, AZ 85004 PHOENIX SYMPHONY N/A PUBLIC CHARITY GENERAL USE ONE NORTH FIRST STREET #200 PHOENIX, AZ 85004 763. N/A PUBLIC CHARITY GENERAL USE POLICE UNITY TOUR INC 12 E. GREAT MEADOW LANE 200, EAST HANOVER, NJ 07936 ST. MARGARET EPISCOPAL CHURCH PUBLIC CHARITY GENERAL USE N/A 20900 CHENAL PARKWAY 100, LITTLE ROCK, AR 72223 PUBLIC CHARITY GENERAL USE ZIMMER CHILDREN'S MUSEUM N/A 6505 WILSHIRE BLVD #100 500. LOS ANGELES, CA 90048 54 112. Total from continuation sheets

:

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASH IN	IVESTMENTS S	TATEMENT 1	
SOURCE				AMOUNT	
JP MORGAN CHASE BANK				1.	
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A	_	1.	
FORM 990-PF	LEGAL FEES		S	STATEMENT 2	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES	
LEGAL FEES	410.	410.	· · · · · · · · · · · · · · · · · · ·	0.	
TO FM 990-PF, PG 1, LN 16A =	410.	410.		0.	
FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 3		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING FEES	2,541.	2,541.		0.	
TO FORM 990-PF, PG 1, LN 16B	2,541.	2,541.		0.	
FORM 990-PF	OTHER EXPENSES		STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES	
	<del></del>				
BANK CHARGES	100.	100.		0.	

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	5
NAME OF CONTRIBUTOR	ADDRESS		
STEVE & KELLY ELLMAN	2850 EAST CAMELBACK ROAD, PHOENIX, AZ 85016	SUITE 110	
FORM 990-PF	PART XV - LINE 1A LIST OF FOUNDATION MANAGERS	STATEMENT	6

NAME OF MANAGER

STEVE ELLMAN KELLY ELLMAN

#### Form **8868**

(Rev January 2012)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

• If you	are filing for an Automatic 3-Month Extension, comple	te only Pa	irt I and check this box			$\triangleright \mathbf{x}$
• If you	are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of	this form)		
Do not d	omplete Part II unless you have already been granted	an automa	itic 3-month extension on a previous	sly filed Fo	rm 8868	
Electron	ic filing (e-file). You can electronically file Form 8868 if y	you need a	a 3-month automatic extension of tir	ne to file (	6 months fo	r a corporation
required	to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically f	île Form 8	868 to reque	est an extension
of time to	file any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for	Transfers.	Associated 1	With Certain
Personal	Benefit Contracts, which must be sent to the IRS in page	er format	(see instructions). For more details	on the elec	ctronic filing	of this form,
visit www	virs gov/efile and click on e-file for Chanties & Nonprofits	S				
Part I	Automatic 3-Month Extension of Time	e. Only s	submit original (no copies ne	eded).		
A corpor	ation required to file Form 990-T and requesting an autor	matic 6-mo	onth extension - check this box and	complete		
Part I on	ly .					<b>&gt;</b>
	corporations (including 1120-C filers), partnerships, REM orne tax returns	IICs, and t	rusts must use Form 7004 to reques	st an exter	nsion of time	
Type or	Name of exempt organization or other filer, see instru	ictions		Employe	r identificati	on number (EIN) o
print						•
•	ELLMAN FOUNDATION			X	20-08	96058
File by the due date for	Number street and some service on Ma D.O. hours	ee instruc	tions.	Social se	curity numb	
filing your	2850 E CAMELBACK RD, SUITE				•	, ,
return See Instructions			ress, see instructions.			
	PHOENIX, AZ 85016					
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4
Applicat	ion	Return	Application			Return
is For		Code	Is For			Code
Form 99	<u> </u>	01	Form 990-T (corporation)			07
		02	Form 1041-A			08
	Form 990-BL Form 990-EZ		Form 4720			09
Form 99		01	Form 5227			10
	O-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	0-T (trust other than above)		06 Form 8870			12
101111 33	STEVEN E WHITW		1.00.00			
■ Thah	ooks are in the care of   2850 EAST CAME		ROAD SHITTE 110 -	РНОВ	NTX. Z	Z 85016
	hone No. ► 602-840-3000	<u> </u>	FAX No. ► 602-840-81			18 03020
	organization does not have an office or place of busines	a in the Li				▶ □
	is for a Group Return, enter the organization's four digit			if this is fo	e the whole	group check this
		_	<u> </u>			
box >	equest an automatic 3-month (6 months for a corporation				Jera trie exte	ilision is ioi
1 110			tion return for the organization nam		The extens	IOD
	for the organization's return for:	n organiza	tion retain for the organization man	ou above.	IIIO OXIGIIS	OII
	X calendar year 2011 or					
	tax year beginning		ort and na			
	tax year beginning	٠	d enong		· ·	
0 16 4	he tay year antared in line 1 is for loss than 10 months.	hook rooc	on Initial return	Final retu	rn	
2  ft	he tax year entered in line 1 is for less than 12 months, o	Heck reas	on midalletum	rinarietu	(11)	
سا	Change in accounting period					
3a If t	his application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069. e	nter the tentative tax, less any			
nonrefundable credits. See instructions				3a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and					-	
	timated tax payments made Include any prior year over			3ь	s	0 .
				- 30	<del>  3</del>	<u> </u>
	lance due, Subtract line 3b from line 3a, Include your pa			30		0.
	using EFTPS (Electronic Federal Tax Payment System)			3c	EO for pour	
	If you are going to make an electronic fund withdrawal			UIII 66/9		
LHA I	For Privacy Act and Paperwork Reduction Act Notice,	see instr	uctions.		rorm	<b>8868</b> (Rev. 1 2012

123841 01-04-12