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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.

OMB No 1545-0052

For	calen	dar year 2011 or tax year beginning		, and ending		
Nar	ne of	foundation		-	A Employer identification	number
E	DE:	LMANN FAMILY FOUNDATION			27-1526180	<u> </u>
Nun	nber a	nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
P	.0	. BOX 4914			(202)-345-	1446
City	or to	own, state, and ZIP code		· · · · · · · · · · · · · · · · · · ·	C If exemption application is p	ending, check here
-		LINE VILLAGE, NV 89450)			
		all that apply: Initial return		ormer public charity	D 1. Foreign organizations	s check here
•		Final return	Amended return	ormor public onarty	D 1.1 or orgin organizations	5, 01100K 11010
		Address change	Name change		Foreign organizations me 2. check here and attach co	eeting the 85% test,
	haal				†	
<u> </u>					E If private foundation sta	
÷			Other taxable private found	, , , , , , , , , , , , , , , , , , , ,	under section 507(b)(1)	(A), cneck nere
		· —	ing method: X Cash	Accrual	F If the foundation is in a	
			ther (specify)	6 1	under section 507(b)(1))(B), check here $ ightharpoonup$
	\$	666 , 491 . (Part I, colu	ımn (a) must be on casn	Dasis)		<u> </u>
Pa	irt I	I The total of amounts in columns (b) (c) and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
	_	necessarily equal the amounts in column (a))	expenses per books	ıncome	income	(cash basis only)
	1	Contributions, gifts, grants, etc., received	70,000.		' ', ' ,	, ' ,
	2	Check If the foundation is not required to attach Sch. B		»,	, , , , , , , , , , , , , , , , , , , ,	ris .
	3	Interest on savings and temporary cash investments				4
	4	Dividends and interest from securities	6,290.	6,290.	6,290.	STATEMENT 1
	5a	Gross rents	·			. 23
	Ь	Net rental income or (loss)	*		3	
	Ι.	Net gain or (loss) from sale of assets not on line 10		, *	,	(8 × 160°)
Ĭ	l b	Gross sales price for all) , (1. 1.
Revenue	7 ا	assets on line 6a Capital gain net income (from Part IV, line 2)		0.	(* <u>*</u> /	
æ	8	Net short-term capital gain		¥*****	0.	10 to
	9	Income modifications		(2)		**************************************
	1	Gross sales less returns	* * * * * * * * * * * * * * * * * * * *			*A*
	Ι.	and allowances	N .		. £	1 103 120
	ı	Less Cost of goods sold		·	* ¹	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		Gross profit or (loss)		* * * * * * * * * * * * * * * * * * * *		
		Other income	76 200	6 200	6 200	^ *
	12	Total. Add lines 1 through 11	76,290.	6,290.	<u> </u>	,
	13	Compensation of officers, directors, trustees, etc	0.	0.	0.	0
	14	Other employee salaries and wages				
s	1	Pension plans, employee benefits				
uses	l l	Legal fees				
ĕ	b	Accounting fees STMT 2	RECE!	ED 0.	0.	0
Ä	C	Other professional fees	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		_	
<u>ĕ</u>	17	Interest .	6	35		
rat	18	Taxes	8 NOV 1 9 2	012 9		
ist	19	Depreciation and depletion		38		
Ë	20	Occupancy	OCOCH	1.7		
Administrative Expe	21	Travel, conferences, and meetings	OGDEN,	UII		
and /	22	Printing and publications				
е Б	23	Other expenses STMT 3	225.	0.	0.	0
Operating	24	Total operating and administrative		<u>_</u>		
era	~	expenses. Add lines 13 through 23	1,375.	0.	0.	o
o	25	Contributions, gifts, grants paid	40,000.		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	40,000
	F	Total expenses and disbursements.	=0,000.	5 St. 2 5 " Lat 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	* { '* . ' . ' . ' . ' . ' . ' . ' . ' . '	40,000
	26	•	/1 275	١	0	40 000
_		Add lines 24 and 25	41,375.	0.	0.	40,000
	i	Subtract line 26 from line 12:	34,915.		1	. A
		Excess of revenue over expenses and disbursements .		<u> </u>	<u> </u>	
	ı	Net investment income (if negative, enter -0-)	'11"	6,290.		
'great		Adjusted net income (if negative, enter -0-)			6,290.	```
1235 12-0	บา 2-11	LHA For Paperwork Reduction Act Notice, see	instructions.			Form 990-PF (2011

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		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	t year
<u> P</u>	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	104,538.	435,951.	435,951.
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			~
	4	Pledges receivable ▶			
		Less; allowance for doubtful accounts ▶			
	5	Grants receivable			
	1	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts		** = *** ***	1 - a a
တ	8	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
As		Investments - U.S. and state government obligations		****	
		Investments - corporate stock			
	ŀ	Investments - corporate bonds			
		Investments - land, buildings, and equipment basis	, , ,		
	Ι''		·•		
	12	Less accumulated depreciation Investments - mortgage loans		···	
	13	Investments - other STMT 4	591,540.	295,042.	230,540.
		Land, buildings, and equipment basis	/	233,012.	230,310
	14		1 * i Å	* 4	
	1.	Less accumulated depreciation			<u></u>
	15	Other assets (describe			
	16	Total assets (to be completed by all filers)	696,078.	730,993.	666,491.
_	17	Accounts payable and accrued expenses	000,000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4 4 5
	18	Grants payable			
ro.	19	Deferred revenue			लि की विल है
Ę.	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable			
==	22	·			
		Other habilities (describe			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_	20	Foundations that follow SFAS 117, check here	•		
		and complete lines 24 through 26 and lines 30 and 31.			
es	24	Unrestricted			
nces		Temporarily restricted			
3ale		Permanently restricted			
ğ	~	Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds	600,000.	600,000.	
ets	1	Paid-in or capital surplus, or land, bldg., and equipment fund	0.00,000	0.00,000.	
Net Assets or Fund Bala	28	Retained earnings, accumulated income, endowment, or other funds	96,078.	130,993.	
et /		Total net assets or fund balances	696,078.	730,993.	
Ž	30	I UCA I IICI ASSEIS UI IUNU DAIANEES	0,0,0,0	, 50, 555	
	31	Total liabilities and net assets/fund balances	696,078.	730,993.	
F	art	III Analysis of Changes in Net Assets or Fund B	alances		·
_		I net assets or fund balances at beginning of year - Part II, column (a), line	30		Γ
1			00		696,078
^	•	st agree with end-of-year figure reported on prior year's return)		 	34,915
2		r amount from Part I, line 27a ir increases not included in line 2 (itemize)		2	0.
3		lines 1, 2, and 3		4	730,993
		eases not included in line 2 (itemize)	•	5	, , , , , , , , ,
	1000	OGDOO TO CHOIGANA DE HID E TROUBENT F		1 3	

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730,993.

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

(a) List and designation (a) Experience (a) Capital Galins	(b) F	low acquired - Purchase - Donation		acquired lay, yr.)	(d) Date sold (mo., day, yr.)			
1a								
b NC)NE		×					
C				<u> </u>				
d	<u> </u>			ļ				
е	(1) Depreciation allowed	- , 	st or other basis	i,				
(e) Gross sales price				iain or (loss) s (f) minus (
<u>a</u>	<u> </u>							
<u>b</u>		<u> </u>						
<u>C</u>	-	-		-				
d							-	
Complete only for accets show	ung gaun in galumn (h) and awns	d by the foundation	on 12/21/60			//\ O //	No. 1. (In No. 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) E>	cess of col. (i) col. (j), if any	\dashv	C	ol. (k), but	Col. (h) gain not less thar (from col. (i	1 -0-) or
2			(,,, ,	\dashv				
<u>a</u> b				\dashv				
C								
d		<u> </u>						
e				_				
2 Capital gain net income or (net o		enter in Part I, line ter -0- in Part I, line		}	2	-		
3 Net short-term capital gain or (lo	oss) as defined in sections 1222 I, column (c).			}				
If (loss), enter -0- in Part I, line & Part V Qualification	Inder Section 4040(e)	Yor Boducos	Tay on Not	1	3 ootmont le			
A MAN MENNY SEE	· · · · · · · · · · · · · · · · · · ·					COINE		N/A
(For optional use by domestic priva	te roundations subject to the set	ction 4940(a) tax of	i net investment iii	icome	i-)			N/A
If section 4940(d)(2) applies, leave	this part blank.							
Was the foundation liable for the se		• •	•	rıod?		-		Yes No
	n each column for each year; see			es.				
(a) Base period years Calendar year (or tax year beginn	(b))	Net value of no	(c)		ts	Distrib	(d) oution ratio ided by col. (c))
2010	iiig iii)				-		(00 (0) 0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
2009								
2008								
2007								<u> </u>
2006								
2 Total of line 1, column (d)	·					2		
3 Average distribution ratio for the the foundation has been in exist		total on line 2 by 5,	or by the number	of ye	ars	3		
		art X. line 5				4		
4 Enter the net value of noncharitable-use assets for 2011 from Part X, line 5 5 Multiply line 4 by line 3								
,,	(40) of Double line (75)	-				5		
6 Enter 1% of net investment inco	nne (176 Ut Part I, IIIIe 270)					6		
7 Add lines 5 and 6		•	-			7		· - · · · - · · - · - · - ·
8 Enter qualifying distributions from If line 8 is equal to or greater the See the Part VI instructions.	om Part XII, line 4 an line 7, check the box in Part V	 /I, line 1b, and comp	plete that part usin	ıg a 19	% tax rate.	8	<u> </u>	
						•		000 DE (004

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Form 4720, to determine if the foundation had excess business holdings in 2011)

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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 2011?

b If "Yes," did it have excess business holdings in 2011 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,

4b X
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N/A

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P	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, s	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	0.
	Average of monthly cash balances	1b	0.
	Fair market value of all other assets	1c	0.
d	Total (add lines 1a, b, and c)	1d	0.
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	0.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0.
6	Minimum investment return. Enter 5% of line 5	6	0.
Ρ	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here X and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	
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.)	1 1	
	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
P	art XII Qualifying Distributions (see instructions)	···	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		40.000
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	40,000.
þ		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	40,000.
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	40,000.
	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	the section

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Part XIII Undistributed income	(366 (131 461 613)	N/A		
	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,		·	<u> </u>	
line 7				
2 Undistributed income, if any, as of the end of 2011	۸,		<i>′</i>	*
a Enter amount for 2010 only		1 132		
b Total for prior years:	``			2
3 Excess distributions carryover, if any, to 2011:	, ,,		,	,
a From 2006	」 ;		!	
b From 2007		, ,		
c From 2008		, , , , , ,	, v	v
dFrom 2009		8	``	ì
e From 2010			,	^
f Total of lines 3a through e				
4 Qualifying distributions for 2011 from	4 * * * *		,	\$** \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Part XII, line 4: ►\$	_		3 34 55 5	, š
a Applied to 2010, but not more than line 2a			*/	
b Applied to undistributed income of prior			1	
years (Election required - see instructions)		ļ		<u> </u>
c Treated as distributions out of corpus				
(Election required - see instructions)			` ×	
d Applied to 2011 distributable amount				
e Remaining amount distributed out of corpus		;	;	
Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))			-	
6 Enter the net total of each column as indicated below:			·	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5			, , , , , , , , , , , , , , , , , , , ,	
b Prior years' undistributed income. Subtract			,	
line 4b from line 2b	, , , , 4			
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				
d Subtract line 6c from line 6b. Taxable	Maria Cara Cara Cara Cara Cara Cara Cara			
amount - see instructions	\$ 7		Ye3 5	764 % 4 %
e Undistributed income for 2010. Subtract line		1 ° 🙀 ' * '		& ~ · · · · ·
4a from line 2a. Taxable amount - see instr.				
f Undistributed income for 2011. Subtract	\$ \frac{1}{2}	<u> </u>		
lines 4d and 5 from line 1. This amount must be distributed in 2012				
7 Amounts treated as distributions out of	*			**
corpus to satisfy requirements imposed by			·	₩,
section 170(b)(1)(F) or 4942(g)(3)			,	
8 Excess distributions carryover from 2006		W. Jakov C. J.		* /
not applied on line 5 or line 7				3 1 1
9 Excess distributions carryover to 2012.		\$ (\$ 13 · .	, , ,	
Subtract lines 7 and 8 from line 6a		8 8'		
10 Analysis of line 9:	. 274		, ,) is the
a Excess from 2007				
b Excess from 2008				
c Excess from 2009] á			* ***
d Excess from 2010			*	, ,
e Excess from 2011		,3		
				Form 990-PF (2011)

the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number of the person to whom applications should be addressed:

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

c Any submission deadlines:

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

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Supplementary Information (continued) 3 'Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year ASPCA CARE AND SHELTERING OF 520 8TH AVENUE, 7TH FLOOR DOGS RESCUED IN THE NEW YORK, NY 10018 ANTI-CRUELTY AND INVESTIGATIONS DIVISION OF THE ASPCA. 5,000. BEST FRIENDS ANIMAL SOCIETY FOR THE HEALTH AND 5001 ANGEL CANYON RD WELFARE OF THE DOG KANAB UT 84741 POPULATION. 5,000. INCLINE VILLAGE COMMUNITY HOSPITAL FOR DIAGNOSTIC IMAGING FOUNDATION ENHANCEMENTS. 880 ALDER AVE INCLINE VILLAGE, NV 89451 5,000. FOODBANK OF NORTHERN NEVADA DIRECT PURCHASE OF 550 ITALY DRIVE FOOD FOR THE FOODBANK. MCCARRAN, NV 89434 5,000. **SMILETRAIN** ASSISTANCE FOR PO BOX 96246 CHILDREN BORN WITH A WASHINGTON, DC 20090 CLEFT PALATE. 5,000. SEE CONTINUATION SHEET(S) ▶ 3a 40,000. Total **b** Approved for future payment NONE

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▶ 3b

٥.

Total

Part XVI-A Analysis of Income-Producing Activities

				 -	nrelated bu	cinece inc	nme	Evel	ided by section	0 512 513	or E14	 -	
	s amounts unle		e indicated.	(a Busii	i) ness	(b Amo)	(C) Exclusion code		(d) \mount	, OF 5 14	Related	(e) or exempt in income
_	m service reven			CO	ue		-	code	·			10110110	
a —												 	
					- 			-					
								 	-				
<u> </u>								\vdash					
, —								├─					
n Fee	s and contracts	from govern	nment agencies										
	ership dues and								 				
	t on savings and							\vdash	<u> </u>				
investn		a tomporary	oue.										
	ds and interest	from securi	ties			_		<u> </u>			-		6,290.
	tal income or (le			17.5	2.00 380	* * * ?	1828	2 35	: Since		N.20	A . 4.	
	t-financed prop	•			· · · · · · ·	,	A X-W Z.		(1500 A-1800 A-1	025.00	7 (72)**	2. 4 X.	
	debt-financed p	-											
	tal income or (le		ersonal								_	<u> </u>	
propert	•	, .							ŀ				
	rvestment incor	ne				_		1			_		
8 Gain or	(loss) from sal	es of assets	other										
	ventory							ŀ				 	
9 Net inc	ome or (loss) fr	om special (events										
10 Gross p	profit or (loss) fi	rom sales of	inventory										
11 Other r	evenue:						-						
a								1				<u> </u>	
b													
						_		<u> </u>					
d													
e													
	al. Add columns				Spirit.		0.	130			0.		6,290. 6,290.
	Add line 12, coli										13		6,290.
(See works	sheet in line 13	instructions	to verify calculations.)										
Part X			nip of Activities to						•				
Line No. ▼	the founda	low how ear ation's exem	ch activity for which incom ipt purposes (other than by	e is rep / provid	orted in col Jing funds f	umn (e) c or such p	of Part XVI-A urposes).	contrit	outed import	antly to t	he accon	nplishment of	
3	INCOME	FROM	INVESTMENTS	IS	USED	FOR	CONTR	IBU	TIONS	TO	CHAR	TTIES	
4	INCOME	FROM	INVESTMENTS	IS	USED	FOR	CONTR	IBU	TIONS	TO	CHAR	ITIES	
	<u> </u>												
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Form 990	-PF (2011) EDELM	ANN FAMI	LY FOUN	DATION	_	27-1	26180	Pa	age 13
Part)	(VII Information Re Exempt Organ		nsfers To a	and Transactions a	nd Relation	ships With Nonc	haritable	∍	
1 Did	the organization directly or indi		y of the followin	g with any other organization	n described in se	ction 501(c) of		Yes	No
	Code (other than section 501(c)		-						
a Tran	sfers from the reporting found	ation to a nonchari	table exempt org	ganization of:				٠,	ł
	Cash						1a(1)		X
(2)	Other assets						1a(2)		X
b Oth	er transactions:								
(1)	Sales of assets to a noncharita	ble exempt organiz	ation				1b(1)		X
(2)	Purchases of assets from a no	ncharitable exempt	torganization				1b(2)		X
(3)	Rental of facilities, equipment,	or other assets					1b(3)		X
(4)	Reimbursement arrangements						1b(4)		X
(5)	Loans or loan guarantees						1b(5)		X
(6)	Performance of services or me	mbership or fundr	aising solicitatio	ns			1b(6)		X
	ring of facilities, equipment, ma	-					1c	<u> </u>	X
	e answer to any of the above is							ets,	
	ervices given by the reporting f			ed less than fair market valu	e in any transacti	on or sharing arrangeme	nt, show in		
	ımn (d) the value of the goods,				T (4) =		<u> </u>		
(a)Line no	(b) Amount involved	(c) Name		e exempt organization	(0) Descripti	on of transfers, transactions,	and sharing an	rangeme	ents
			N/A						
			<u>.</u>		+				
	- 				+				
					+				
					+				
	-				+				
					+				
	' "				+	· 			
-						·			
•	· · ·				†				
•									
	·								
	ne foundation directly or indirec				ations described				_
ın s	ection 501(c) of the Code (othe	r than section 501	(c)(3)) or in sect	tion 527?			Yes	LX	No
b If "\	es," complete the following sch			T					
	(a) Name of org	ganization		(b) Type of organization		(c) Description of relat	ionship		
	N/A_		 		 			_	
						•			
									
	Under penalties of perjury, I declare	that I have examined	this return, includin	ng accompanying schedules and	statements, and to t	he best of my knowledge			
Sign	and belief, it is true, correct, and co	monete Declaration of	preparer (other tha	n taxpayer) is based on all inform	ation of which prepa	urer has any knowledge	May the IRS return with th	e prepa	rer
Here	Visale	11-40	Uman	~ I	PRESI	DENT	shown below X Yes	(see ins	str)? No
	Signature of officer or trustee	y L	0,00	Date	Title		Lan les		_ 110
	Print/Type preparer's na		Preparer's s		Date	Check X If P	TIN		

Form **990-PF** (2011)

(925)-933-8900

P00367469

Firm's EIN ► 20-5589566

Paid

Preparer Use Only DON OLSEN

Firm's name ▶ DB OLSEN & COMPANY

Firm's address ▶ 500 YGNACIO VALLEY RD, SUITE 328

WALNUT CREEK, CA 94596

11-15

self- employed

Phone no.

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2011

Employer identification number

27-1526180 EDELMANN FAMILY FOUNDATION Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt chantable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 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** I 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, chantable, 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

EDELMANN FAMILY FOUNDATION

27-1526180

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	STEPHEN & JACQUELINE EDELMANN 896 TYNER WAY INCLINE VILLAGE, NV 89451	\$\$	Person X 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)
(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.)
(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
402450 01		\$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Employer identification number

EDELMANN FAMILY FOUNDATION

27-1526180

art	Noncash Property (see instructions). Use duplicate copies of Property	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
		\$	
(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
		\$	
(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 (c) Use of gift (d) Description of how gift is held (b) Purpose of gift

(e) Transfer of gift

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM · 990 - PF DIVIDEND	S AND	INTER	EST FROM	SECUE	RITIES	STATEMEN	T 1	
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN AMOUN		
MERRILL LYNCH	•		6,290.		0.	6	,290.	
TOTAL TO FM 990-PF, PART I, L	6,290.			0.	6,290.			
FORM 990-PF	AC	COUNTI	NG FEES			STATEMEN	т 2	
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM	CHARI		
ACCOUNTING		1,150.		0.		0.		
TO FORM 990-PF, PG 1, LN 16B	<u>-</u>	1,150.		0.		<u> </u>	0.	
TO FORM 990-PF, PG 1, LN 16B =			XPENSES	0.		STATEMEN		
	0 (EXPE	THER E	XPENSES (B) NET INV	EST-	(C) ADJUSTED	STATEMEN (D CHARI	т 3	
FORM 990-PF	0 (EXPE	THER E	(B) NET IN	EST-	ADJUSTEI	STATEMEN (D CHARI	T 3	
FORM 990-PF DESCRIPTION	0 (EXPE	THER E A) NSES BOOKS	(B) NET IN	EST-	ADJUSTEI	STATEMEN (C) CHARI ME PURP	T 3) TABLE OSES	
FORM 990-PF DESCRIPTION MISCELLANEOUS	O (EXPE PER	THER E A) NSES BOOKS 225.	(B) NET IN	TEST-ICOME 0.	ADJUSTEI	STATEMEN (C CHARI ME PURP 0.	T 3 TABLE OSES 0.	
FORM 990-PF DESCRIPTION MISCELLANEOUS TO FORM 990-PF, PG 1, LN 23	O (EXPE PER	THER E. A) NSES BOOKS 225. 225. ER INV	(B) NET IN MENT IN	CEST-ICOME 0.	ADJUSTEI	STATEMEN (C) CHARI ME PURP 0.	T 3 TABLE OSES 0. 0. T 4	
FORM 990-PF DESCRIPTION MISCELLANEOUS TO FORM 990-PF, PG 1, LN 23 FORM 990-PF	O (EXPE PER	THER E	(B) NET INV MENT IN ESTMENTS	CEST-ICOME 0.	ADJUSTEI NET INCOM	STATEMEN (D) CHARI ME PURP 0. 0. STATEMEN FAIR MAR VALUE	T 3 TABLE OSES 0. 0. T 4	

·	_					FAM:	ILY FO	UNDATION		27-152	5180
Part XV	Supp	olemei	ntary In	format	ion						
3a Grants	and Cor	ntributio	ns Paid (During th	ne Year (Continua	tion of Pur	pose of Grant or Contr	ibution		
NAME O	REC	CIPII	<u> ENT -</u>	CHRY	YSAL1	[S					
ASSIST	ANCE	FOR	HOME	LESS	AND	LOW-	INCOME	INDIVIDUALS	ТО	ACHEIVE	
EMPLOY	MENT	AND	SELF	-sus	rain <i>a</i>	ABILI'	TY.				
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Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or Foundation show any relationship to contribution Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor GENERAL MUSEUM UNITED STATES HOLOCAUST MEMORIAL OPERATIONS AND MUSEUM 100 RAOUL WALLENBURG PL, SW AWARENESS. WASHINGTON, DC 20024 5,000. DIRECT PURCHASE OF WESTSIDE FOOD BANK 1710 22ND STREET FOOD FOR THE FOOD SANTA MONICA, CA 90404 BANK. 2,500. FOR THE CARE OF LOS ANGELES ANIMAL CARE FOUNDATION PO BOX 100515 ANIMALS. PASADENA, CA 91889 2,500. ASSISTANCE FOR CHRYSALIS HOMELESS AND 1853 LINCOLN BLVD SANTA MONICA, CA 90404 LOW-INCOME INDIVIDUALS TO ACHEIVE EMPLOYMENT AND 2,500. NATIONAL CENTER FOR MISSING AND CARE AND ASSISTANCE FOR MISSING AND EXPLOITED CHILDREN EXPLOITED CHILDREN. 699 PRINCE STREET 2,500. ALEXANDRIA, VA 22314 15,000. Total from continuation sheets