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Form **990-PF**

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0052

2011

| | calendar year 2011, or tax year beginning | | | | 2011, and end | ling | , 20 | |
|----------------|--|--------------|------------------------------|-------------|----------------|--|--|--|
| | ne of foundation DIANA S ELLIS F O GEOFFREY E ELLIS | OUND. | ATION | | | A Employer Identifi 87-0609445 | cation number | |
| | umber and street (or P.O box number if mail is not delivered to street address) Room/suite 83 1ST AVE | | | | | 1 | B Telephone number (see instructions) (801) 595 - 8089 | |
| | or town, state, and ZIP code | | | | | C If exempt, application | is pending, check here 🕨 | |
| | lt Lake City UT 84103 | | I make at make one | | nuble sharts | D. 4. Favoren avennu | estione shock hare. | |
| G | Check all that apply: Initial return | | Amended ret | | public charity | D 1. Foreign organization | | |
| | Address chang | 10 | Name change | | | 1 | nd attach computation | |
| H (| Check type of organization X Section 501 | | _ | | | E If private foundation | on status was | |
| | Section 4947(a)(1) nonexempt charitable trust | | ner taxable priva | | n | terminated under 507(b)(1)(A), chec | | |
| | | | ing method | | Accrual | | | |
| ye | ear (from Part II, col. (c), line 16) | Othe | r (specify) | | <u> </u> | F If the foundation is termination under | | |
| <u>►\$</u> | | art I, colu | ımn (d) must be | on cash bas | sis.) | 507(b)(1)(B), ched | | |
| Pa | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), & (d) may not necessarily equal the amounts in column (a) (see instructions).) | | Revenue and penses per books | | nvestment | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) | |
| | 1 Contributions, gifts, grants, etc., received | Ì | | | | | | |
| | 2 Check X if the foundation is not required to attach Sch B | | | | | | | |
| | 3 Interest on savings and temp. cash investments | | 992 | | 992 | | | |
| | 4 Dividends and interest from securities | | 8,941 | | 8,941 | | | |
| | 5 a Gross rents | | | - | | | | |
| R | income or (loss) | | 8,538 | | | | | |
| E | 6 a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for 40,017 | | 0,330 | | | | | |
| V E | 7 Capital gain net income (from Part IV, line 2). | - | | <u> </u> | 8,538 | | | |
| N | _8—Net-short=term capital gain | | | | | 0 | | |
| U | RS Greene modifications | | | | | 0 | | |
| _ | 10 a-Gross sales less rtns. & allowances 0 | | ••••• | | | | | |
| 2600 | MAY add a sold 15 | ļ | | | | | | |
| ١ | c Gross profit or (loss) (attach schedule) | | | | | | | |
| (| 11 Other income (attach schedule) | <u> </u> | 18,471 | | 18,471 | 0 | | |
| _ _ | Compensation of officers, | | 10,4/1 | | 10,4/1 | | | |
| P | directors, trustees, etc | | | | | | | |
| R | 15 Pension plans, employee benefits | | | - | | | | |
| A | 16 a Legal fees (attach schedule) | | | | | | | |
| ı | b Accounting fees (attach schedule) #1 | | 750 | | | | | |
| N G | c Other professional fees (attach sche#2) | | 2,883 | | | | | |
| & | 17 Interest | | | | | | | |
| A | 18 Taxes (attach schedule) (see instruction#3 | | 108 | | | | | |
| D M | 19 Depreciation (attach sch.) and depletion | | | - | | | | |
| - 1 | 20 Occupancy | | | | | | | |
| N | 21 Travel, conferences, and meetings | | | | | | | |
| E X | 23 Other expenses (attach schedule) #4 | - | 48 | | | | - | |
| P | 24 Total operating and administrative | | | | | | | |
| N | expenses. Add lines 13 through 23 | | 3,789 | | 0 | 0 | | |
| S E S | 25 Contributions, gifts, grants paid | | 15,000 | | | | 15,00 | |
| ร | 26 Total exp & disbursements. Add lines 24 and 25 | | 18,789 | | 0 | 0 | 15,00 | |
| | 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements | | -318 | | | | | |
| | b Net Investment Income (if neg., enter -0- |) | | 1 | 18,471 | | | |
| | c Adjusted net Income (if neg., enter -0-) | | | 1 | | | | |

For Paperwork Reduction Act Notice, see the Instructions.

Form **990-PF** (2011)

15/2

| Ď, | art li | Balance Sheets description column should be for | Beginning of year | End o | f year |
|------------|---------|---|-----------------------------|--|-----------------------|
| | St t bt | end-of-year amounts only. (See inst) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash non-interest-bearing | 3,865 | 3,910 | 3,910 |
| | 2 | Savings and temporary cash investments | | | |
| | 3 | Accounts receivable ▶ | | | |
| | | Less allowance for doubtful accts. ▶ | Ì | | |
| | 4 | Pledges receivable ▶ | | | |
| | l | Less, allowance for doubtful accts ▶ | [| | |
| | 5 | Grants receivable | | | |
| A S | 6 | Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions) Other notes and loans receivable (attach schedule) Less allowance for doubtful accounts | | | |
| S | 8 | Inventories for sale or use | | | |
| T | 9 | Prepaid expenses and deferred charges | | | |
| S | 10a | Investments U.S and state govt. obligations (attach schedule) | | | <u> </u> |
| | ь | Investments corporate stock (attach schedule) #5 | 257,727 | 268,037 | 248,820 |
| | 1 | Investments corporate bonds (attach schedule) #6 Investments land, buildings. | 20,692 | 10,019 | 10,056 |
| | 12 | Less accumulated depreciation (attach schedule) Investments mortgage loans | | | |
| | 13 | Investments other (attach schedule) | | | |
| | 14 | Land, buildings, and equipment basis | | ······································ | |
| | 15 | Other assets (describe | | | |
| | 16 | Total assets (to be completed by all filers see the | | | |
| | ." | instructions. Also, see page 1, item l) | 282,284 | 281,966 | 262,786 |
| T | 17 | Accounts payable and accrued expenses | 202,204 | 201,900 | 202,700 |
| Ī | 18 | Grants payable | | | |
| A B | 19 | Deferred revenue | | | |
| Ļ | 20 | | | | |
| Ī | 21 | Loans from officers, directors, trustees, and other disqualified persons . | | | |
| ľ | | Mortgages and other notes payable (attach schedule) | | | |
| Ë | 22 | Other liabilities (describe >) | | | |
| 5 | 23 | Total liabilities (add lines 17 through 22) | 0 | 0 | |
| | | Foundations that follow SFAS 117, check here X | | | |
| ΝF | | and complete lines 24 through 26 and lines 30 and 31. | | | |
| | 24 | Unrestricted | 282,284 | <u>281,966</u> | |
| מד D | 25 | Temporarily restricted | | | |
| A c B | 26 | Permanently restricted | | <u> </u> | |
| ABAL | | Foundations that do not follow SFAS 117, ck. here ▶ ☐ and complete lines 27 through 31. | | | |
| T A S N | 27 | Capital stock, trust principal, or current funds | | | |
| | 28 | Paid-in or capital surplus, or land, bldg., and equipment fund | | | |
| O É R S | 29 | Retained earnings, accumulated income, endowment, or other funds | | | |
| | 30 | Total net assets or fund balances (see the instructions) | 282,284 | 281,966 | |
| | 31 | Total liabilities and net assets/fund balances (see the inst.) | 282,284 | 281,966 | |
| Pa | rt III | Analysis of Changes in Net Assets or Fund Bal | | | <u></u> |
| 1 | | net assets or fund balances at beginning of year Part II, colum | | with | |
| | | of-year figure reported on prior year's return) | | | 282,284 |
| 2 | | r amount from Part I, line 27a | | | -318 |
| 3 | | r ingrance not included in line (C. (down)) b | | | |
| 4 | | lines 1, 2, and 3 | | | 281,966 |
| 5 | | eases not included in line 2 (itemize)▶ | | 5 | |
| 6 | | net assets or fund balances at end of year (line 4 minus line 5) | Part II, column (b), line : | | 281,966 |

| | and Losses for Tax on Investment the kind(s) of property sold (e.g., real | | (b) Howacquired | (c) Date acquired | (d) Date sold |
|---|---|---|---|----------------------|--|
| 2-story brick wareh | ouse; or common stock, 200 shs. M | LC Co.) | P Purchase D Donation | (mo., day, yr.) | (mo , day, yr.) |
| 1a See attachment | #7 | | | | |
| b | | | | | |
| С | | | | | |
| _d | | | | | |
| <u>e</u> | , | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or plus exper | | | n or (loss) n minus (g) |
| <u>a</u> | | | | | |
| _b | | | | | |
| d | | | | | <u> </u> |
| | | | · | | |
| | lowing gain in column (h) and owne | d by the foundation | on 12/31/69 | (I) Coine (Col | (h) gain minus |
| (I) F.M.V. as of 12/31/69 | (J) Adjusted basis as of 12/31/69 | (k) Excess | s of col. (I) | col. (k), but not | . (h) gain minus less than -0-) or om col. (h)) |
| a | | | <u> </u> | | |
| b | | | | | |
| | | | | | |
| d | | | | | |
| <u>e</u> | | | | | |
| 2 Capital gain net income or (| net capital loss) If gain, a | also enter in Part I, I enter -0- in Part I, | line 7 | 2 | 8,538 |
| | or (loss) as defined in sections 1222 ne 8, column (c) (see the instruction | | ¬ | | |
| _ | line 8 | • | | 3 | 0 |
| | Under Section 4940(e) for | | n Net Investn | nent Income | _ |
| | e section 4942 tax on the distributable qualify under section 4940(e). Do i | | | od? | . Yes X No |
| 1 Enter the appropriate amou | int in each column for each year; se | e the instructions be | efore making any e | entries. | |
| (a) Base period years Calendar year (or tax year beg ii | (b) Adjusted qualifying distribu | itions nonc | (C) Net value of haritable-use assets | Dis (col. (b) | (d) tribution ratio divided by col (c)) |
| 2010 | | | | | |
| 2009 | | | ···· | | |
| 2008 | | | | | |
| 2007 | | | | | |
| 2006 | | | | | |
| • T-4-1 -4 b 4 b (-1) | | | | | 0 00000 |
| | or the 5-year base period divide | | | | 0.00000 |
| - | brithe 5-year base period divide been in existence if less than 5 year | | - | | 0.00000 |
| 4 Enter the net value of nonc | charitable-use assets for 2011 from | Part X, line 5 | | 4 | 286,354 |
| 5 Multiply line 4 by line 3 | | | | 5 | |
| 6 Enter 1% of net investment | income (1% of Part I, line 27b) | | | 6 | 185 |
| 7 Add lines 5 and 6 | | | | 7 | 185 |
| 8 Enter qualifying distribution | ns from Part XII, line 4 | | | 8 | 15,000 |
| If line 8 is equal to or great instructions. | er than line 7, check the box in Part | VI, line 1b, and cor | mplete that part us | ng a 1% tax rate. Se | ee the Part VI |

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| Par | Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 see the I | nstructio | ns) | |
|-----|--|------------------|----------|----------|
| 1 a | Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1 | | | |
| | Date of ruling or determination letter (attach copy of letter if necessary see inst.) | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check | | 1 | 85 |
| | here ▶ X and enter 1% of Part I, line 27b | | | |
| C | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% | | | |
| | of Part I, line 12, col. (b). | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2 | | | 0 |
| 3 | Add lines 1 and 2 | | <u>1</u> | .85 |
| 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 | | 1 | .85 |
| 6 | Credits/Payments: | | | |
| а | 2011 estimated tax payments and 2010 overpayment credited to 2011 6a | | | |
| þ | Exempt foreign organizations tax withheld at source | | | |
| C | Tax paid with application for extension of time to file (Form 8868) | | | |
| d | Backup withholding erroneously withheld | | | ^ |
| 7 | Total credits and payments Add lines 6a through 6d | | | 0 |
| 8 | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached | | | <u> </u> |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | | .85 |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | | |
| 11 | Enter the amount of line 10 to be: Credited to 2012 estimated tax ▶ Refunded ▶ 11 | | | |
| | t VII-A Statements Regarding Activities | | | No |
| 1 a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or | . 1a | Yes | No X |
| | Intervene in any political campaign? | · la | | |
| Þ | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)? | . 1b | | X |
| | definition)? | . 15 | \vdash | <u> </u> |
| | | | | |
| _ | or distributed by the foundation in connection with the activities. | 1c | | Х |
| | Did the foundation file Form 1120-POL for this year? Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | ļ | |
| a | (1) On the foundation > \$ 0 (2) On foundation managers > \$ 0 | | | |
| _ | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed | - [| | |
| e | on foundation managers > \$ 0 | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 | | Х |
| - | If "Yes," attach a detailed description of the activities | | | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of | | | |
| ŭ | incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | . 3 | | X |
| 4 a | D. Lal., formal data and have a second process of the control of t | 4a | | Х |
| b | | . 4b | N/A | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | | Х |
| | If "Yes," attach the statement required by General Instruction T. | | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either. | | | |
| | By language in the governing instrument, or | | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions that | | | |
| | conflict with the state law remain in the governing instrument? | 6 | L | X |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the yr.? If "Yes," complete Part II, col. (c), & Part XV. | 7 | X | |
| 8 a | Enter the states to which the foundation reports or with which it is registered (see the instructions) | | | |
| | ▶NONE | _ | | |
| 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 | ļ |
| 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 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete | , | | |
| | Part XIV | | <u> </u> | X |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names | | | |
| _ | and addresses | | <u></u> | X |
| JVA | 11 990PF4 TWF 990 Copyright Forms (Software Only) - 2011 TW | orm 990 - | -PF | (2011 |

| | • | | | |
|------|--|----|----------|---------------|
| Form | 990-PF-(2011) | | Pa | ge 5 |
| Par | t.VII-A Statements Regarding Activities (continued) | | | |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the | | | |
| | meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) | 11 | ł | X |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person | | | |
| | had advisory privileges? If "Yes," attach statement (see instructions) | 12 | | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Х | |
| | Website address ▶n/a | | | |
| 14 | The books are in care of ▶See attachment #8 Telephone no. ▶ | | | |
| | Located at ► ZIP+4 ► | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 Check here | | | ightharpoonup |
| | and enter the amount of tax-exempt interest received or accrued during the year | | | |
| 16 | At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, | | Yes | No |
| | securities, or other financial account in a foreign country? | 16 | | X |
| | See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the | | | |
| | foreign country ▶ | | | |
| Par | t VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| 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?. | | 1 | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | |
| | a disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available | | | |
| | for the benefit or use of a disqualified person)? | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" | | | |
| | if the foundation agreed to make a grant to or to employ the official for a period | | | |
| | after termination of government service, if terminating within 90 days.) | | | |
| b | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in | | | |
| | Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | 1b | | X |
| | Organizations relying on a current notice regarding disaster assistance check here | | | |
| С | 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 2011? | 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)). | | | |
| а | At the end of tax year 2011, did the foundation have any undistributed income (lines 6d | | | |
| | and 6e, Part XIII) for tax year(s) beginning before 2011? | | | |
| | If "Yes," list the years ▶ 20 , 20 , 20 , 20 | | | |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) | | | |
| | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) | | | |
| | to all years listed, answer "No" and attach statement see instructions.) | 2b | | X |
| C | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | | | |
| | ▶ 20 <u> </u> | | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business | | | |
| | enterprise at any time during the year? Yes 🗓 No | | | |
| 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, Form 4720, to determine | | | |
| | If the foundation had excess business holdings in 2011.) | 3b | <u> </u> | X |

4b

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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?

| | | -PF (2011) DIANA S ELLIS FOUND -B Statements Regarding Activ | | | Required (continued | | Page 6 |
|----------|-------------|--|--------------------------------------|---|--|------------|-----------------------|
| | - | ing the year did the foundation pay or incui | | | <u>, , , , , , , , , , , , , , , , , , , </u> | ·/ | |
| | | Carry on propaganda, or otherwise attemp | • | on (section 4945(e))? | Yes 🗓 N | 10 | |
| | (2) | Influence the outcome of any specific pub | | | [] 100 [] | . | |
| | \- / | on, directly or indirectly, any voter registra | | | Tyes 🛛 N | | |
| | (3) | Provide a grant to an individual for travel, | | | | t t |] |
| | (4) | Provide a grant to an organization other th | - | | [] 103 [2] | . | |
| | ('7 | in section 509(a)(1), (2), or (3), or section | | - | Yes 🗓 N | lo l | |
| | (5) | Provide for any purpose other than religion | | • | [163 [| • | |
| | ۱۳, | educational purposes, or for the preventio | | • | Yes 🛛 N | | |
| b | If ar | ny answer is "Yes" to 5a(1)-(5), did any of the | • | | | • | |
| _ | | julations section 53 4945 or in a current not | | | | A 5b | |
| | | anizations relying on a current notice regar | | | | | |
| c | | e answer is "Yes" to question 5a(4), does to | | | | U ∤ | |
| · | | | | • | NI/A Dvas Da | | |
| | | ause it maintained expenditure responsibili 'es," attach the statement required by Regu | | | .N/A ∐Yes ∐n | 10 | |
| 62 | | | | ` ' | | | |
| Va | | the foundation, during the year, receive an | · · | | | | |
| h | | a personal benefit contract? | | | | | 7, |
| U | | | ums, airectly or maired | cuy, on a personal benefit | contract? | . 6b | X |
| 7- | | 'es" to 6b, file Form 8870. | | d-4- d x 1 (x | , D | | |
| | | iny time during the tax year, was the foundation | | | | | |
| | | es," did the foundation receive any procee | | | | | <u> </u> |
| Par | I VI | III Information About Officers, and Contractors | Directors, Truste | es, Foundation Ma | inagers, Hignly Pa | ia Emplo | yees, |
| | | | | | | | |
| | LIST | all officers, directors, trustees, foundati | | er compensation (see in | | | |
| | | (a) Name and address | (b) Title, and avg hours per week | (c) Compensation (if not paid, enter -0-) | (d) Contributions to employee benefit plans | (e) Expens | |
| Coc | | ttoobmort #0 | devoted to position | (II not paid, enter -o-) | and deferred comp | other all | owances |
| 566 | a a | ttachment #9 | | | | | |
| | | | | İ | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | <u></u> | |
| 2 | | npensation of five highest-paid employe one, enter "NONE." | es (other than those | included on line 1 se | ee Instructions). | | |
| 10 | \ NI~ | me and address of each employee paid | (b) Title, and avg. | | (d) Contributions to | | |
| ţa |) IVa | more than \$50,000 | hours per week | (c) Compensation | employee benefit plans and deferred | (e) Expens | e account, owances |
| | | | devoted to position | | compensation | outer and | owances |
| See | a | ttachment #10 | | | | | |
| | | | | ļ į | | | |
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| | | | | | | | |
| | | | | | | | |
| | | | · | | | | |
| Total | num | nber of other employees paid over \$50,000 | | <u> </u> | | L | |
| | | J. Jillor Siliployees paid over \$50,000 | <u></u> | | <u> </u> | <u></u> ▶ | 0_ |

| Form 990-PF (2011) DIANA S ELLIS FOUNDATION 87- | -0609445 | Page 7 |
|--|---------------------------------------|--------------------|
| Part VIII Information About Officers, Directors, Trustees, Fo | oundation Managers, High | ly Paid Employees, |
| and Contractors (continued) 3 Five highest-paid independent contractors for professional services (see the services) | he instructions) If none enter " | NONE " |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| See attachment #11 | (2) 1)20 01 00 1100 | (6) 551115111511 |
| | | |
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| | | |
| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services | | |
| Total number of others receiving over \$50,000 for professional services | · · · · · · · · · · · · · · · · · · · | <u> </u> |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant strong of organizations and other beneficiaries served, conferences convened, research papers produced | | Expenses |
| 1 | | |
| | | |
| | | |
| 2 | | |
| | | |
| | | |
| 3 | | |
| | | |
| 4 | | |
| | | |
| | | |
| Part IX-B Summary of Program-Related Investments (see the | instructions) | |
| Describe the two largest program-related investments made by the foundation dur | ring the tax year on lines 1 and 2. | Amount |
| 1 | | |

2

3

All other program-related investments. See the instructions.

▶

| Pa | Minimum Investment Return (All domestic foundations must complete this part. Foreign found | lations, | |
|---------|--|--|------------------|
| | see the instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., | - | |
| 1 | , , , , - | | |
| • | purposes Average monthly fair market value of securities | 1a | 283,607 |
| ه د | Average of monthly cash balances | 1b | 7,108 |
| | Fair market value of all other assets (see the instructions) | 1c | 7,108 |
| c | Total (add lines 1a, b, and c) | 1d | 290,715 |
| d | Reduction claimed for blockage or other factors reported on lines 1a and | " | 230,713 |
| е | 1c (attach detailed explanation) | | |
| 2 | Acquisition indebtedness applicable to line 1 assets. | 2 | |
| 3 | | 3 | 290,715 |
| 4 | Subtract line 2 from line 1d | | 250,715 |
| 4 | , , | 4 | 1 261 |
| _ | the instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. | 5 | 4,361 286,354 |
| 5 6 | , | 6 | 14,318 |
| _ | Minimum Investment return. Enter 5% of line 5 | 1 6 | 14,310 |
| Pa | t Xi Distributable Amount (see the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this part) | | |
| 1 | N. C. | 11 | 14,318 |
| ، 2a | Tax on investment income for 2011 from Part VI, line 5 | | 14,310 |
| b | Income tax for 2011. (This does not include the tax from Part VI) | - | |
| C | | 2c | 185 |
| 3 | Add lines 2a and 2b | 3 | 14,133 |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 | | 5 | 14,133 |
| 6 | Add lines 3 and 4 | 6 | 14,133 |
| 7 | Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, | | · |
| • | line 1 | 7 | 14,133 |
| | | '' | 14,133 |
| Pa | Qualifying Distributions (see the instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes. | | |
| а | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 15,000 |
| b | Program-related investments total from Part IX-B | 1b | |
| 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 | 15,000 |
| 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 (see the instructions) | 5 | 185 |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 14,815 |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether t | he found | |
| | qualifies for the section 4940(e) reduction of tax in those years. | | |
| | | | 000 DE (*** |

| Par | t XIII Undistributed Inc | ome (see the | nstructions) | | | _ |
|-----|--|---------------------------------------|---|---------------------|---|---|
| | | | (a) | (b) | (c) | (d) |
| 1 | Distributable amount for 2011 fro | om Part XI, | Corpus | Years prior to 2010 | 2010 | 2011 |
| | line 7 | | | | | 14,133 |
| 2 | Undistributed income, if any, as of the | end of 2011. | | - | | |
| а | Enter amount for 2010 only | [| | | | |
| b | Total for prior years 20, 20 | , 20 | | | | _ |
| 3 | Excess distributions carryover, if any, | | | | | |
| а | From 2006 | İ | | | | |
| | From 2007 | | | | | |
| С | From 2008 | | | | | |
| | From 2009 | | | | | |
| е | From 2010 | 192 | | | | |
| | Total of lines 3a through e , | | 192 | | | |
| 4 | Qualifying distributions for 2011 from I | Part XII, | | | | |
| | line 4 ▶ \$ 15,00 | 0 | | | | |
| а | Applied to 2010, but not more th | nan line 2a | | : | | |
| b | Applied to undistributed income of prior | or years | | | | *************************************** |
| | (Election required see the instruction | ons) | | | | |
| С | Treated as distributions out of co | orpus | | | | |
| | (Election required see the ins | structions) | | | | |
| d | Applied to 2011 distributable am | ount | | | | 15,000 |
| е | Remaining amount distributed out of co | orpus | | | | |
| 5 | 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 colu | umn as | | | | |
| | Indicated below: | | | | | |
| а | Corpus Add lines 3f, 4c, and 4e. Subtra | act line 5 | 192 | | | |
| b | Prior years' undistributed income | e Subtract | ······································ | | | |
| | line 4b from line 2b | | | | | |
| С | Enter the amount of prior years' undist | ····· | ······································ | | | |
| | income for which a notice of deficienc | y has been | | | | |
| | issued, or on which the section 4942(a |) tax has | | | | |
| | been previously assessed | | | | | |
| d | Subtract line 6c from line 6b Tax | ******** | | | | |
| | amount see the instructions | · · | | | | |
| е | Undistributed income for 2010. S | ****** | *************************************** | | | |
| | line 4a from line 2a. Taxable amo | ount | | | | |
| | see the instructions | | | | | |
| f | Undistributed income for 2011. | | ······································ | | | |
| | lines 4d and 5 from line 1. This a | amount | | | | |
| | must be distributed in 2012 | | | | | |
| 7 | Amounts treated as distributions | · · · · · · · · · · · · · · · · · · · | | | | |
| | corpus to satisfy requirements in | nposed | | | | |
| | by section 170(b)(1)(F) or 4942(c | | | | | |
| | the instructions) | | | | | |
| 8 | Excess distributions carryover fro | | | | *************************************** | |
| | not applied on line 5 or line 7 (se | 1 | | , | | |
| | instructions) | | | | | |
| 9 | Excess distributions carryover | | | | | |
| | Subtract lines 7 and 8 from line i | | 192 | | | |
| 10 | Analysis of line 9 | · · · · · · | +24 | | | |
| а | Excess from 2007 | | | | | |
| | Excess from 2008 | | | | | |
| | Excess from 2009 | | | | | |
| | Excess from 2010 | 192 | | | | |
| | Excess from 2011 | 868 | | | | |

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| Par | XIV Private Operating Found | ations (see instru | ctions and Part VII-A | , question | 9) | | |
|----------|--|-------------------------|-------------------------|--------------|--------------|---------------------------------------|------------------|
| 1a | If the foundation has received a ruling or | determination letter | that it is a private op | erating | | | _ |
| | foundation, and the ruling is effective for | | | | | N/ | |
| b | Check box to indicate whether the found | ation is a private op | erating foundation de | escribed ii | n section | 4942(j)(3) or | 4942(j)(5) |
| 2a | Enter the lesser of the adjusted net | Tax year | | Prior 3 | years | | (e) Total |
| | Income from Part I or the minimum Investment return from Part X for each | (a) 2011 | (b) 2010 | (c) : | 2009 | (d) 2008 | (e) Total |
| | year listed | | | | | | |
| b | 85% of line 2a | | | | | | |
| _ | Qualifying distributions from Part XII, | | | | | | |
| · | line 4 for each year listed | | | | | | |
| А | Amounts included in line 2c not used | | | | | | |
| u | directly for active conduct exempt act. | | · | 1 | | | |
| _ | Qualifying distributions made directly | | | | | · | |
| е | for active conduct of exempt activities. | | | | | | |
| | Subtract line 2d from line 2c | | | ļ | | | |
| 3 | Complete 3a, b, or c for the alternative | | | | | | |
| 3 | test relied upon. | | | | | - | |
| а | "Assets" alternative test enter: | | | | | | |
| | (1) Value of all assets | | | | | | |
| | (2) Value of assets qualifying under | | | | | | |
| | section 4942(j)(3)(B)(i) | | | | | | |
| b | "Endowment" alternative test enter | | | | | | |
| | 2/3 of min. investment return shown in Part X, line 6 for each year listed | | | 1 | | | |
| С | "Support" alternative test enter: | | | | | - | |
| • | (1) Total support other than gross | | | İ | | | |
| | 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) | | | 1 | | | |
| | (3) Largest amount of support from an | | | | | | |
| | exempt organization | | | | | | |
| | (4) Gross investment income | | | | | | |
| Pa | nt XV Supplementary Informat | | | the fou | ındation | had \$5,000 or | more in assets |
| | at any time during the y | | instructions.) | | | | |
| 1 | Information Regarding Foundation Ma | _ | | | | | |
| а | List any managers of the foundation who | | | | | ceived by the found | ation before the |
| | close of any tax year (but only if they have | ve contributed more | than \$5,000). (See s | section 50 | 7(d)(2)) | | |
| | None | | tal | | | ha hamana ana ana ana ana | |
| b | List any managers of the foundation who | | | | or an equal | ly large portion of tr | ne ownersnip |
| | of a partnership or other entity) of which | the foundation has | a 10% or greater into | erest. | | | |
| | None Information Regarding Contribution, C | Pront Ciff Loon S | shelarahin ata Bra | arama: | | | |
| 2 | Check here $\blacktriangleright \overrightarrow{X} $ if the foundation only | | | | nanizatione | and does not acce | nt unenlicited |
| | requests for funds If the foundation make | | | | | | |
| | complete items 2a, b, c, and d | ves giits, grants, etc. | (see the manachoric | o, to indivi | dudis or or | garnzadono andor o | and conditions, |
| | The name, address, and telephone num | her of the nerson to | whom applications | should be | addressed | · · · · · · · · · · · · · · · · · · · | |
| đ | me name, address, and telephone num | ion of the beloof to | THOM applications | Should Do | - AGG 00000 | - | |
| | | | | | | | |
| | The form in which applications should b | e submitted and info | ormation and materia | als thev sh | ould includ | le: | |
| _ | The ferry in which applications endula 2 | | | | | | |
| | | | | | | | |
| | Any submission deadlines | | | | | | |
| | - | | | | | | |
| | | | | | | | |
| d | Any restrictions or limitations on awards, | such as by geogra | phical areas, charital | ole fields, | kınds of ins | stitutions, or other fa | ictors. |
| | | | | | | | |

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Page **11**

87-0609445 Form 990-PF (2011) DIANA S ELLIS FOUNDATION Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment

| 5 Grants and Contributions Faid Dui | If recipient is an individual, | Foundation | | |
|-------------------------------------|--------------------------------|-------------|---------------------|-------------|
| Recipient | show any relationship to | status of | Purpose of grant or | Amount |
| Name and address (home or business) | any foundation manager | recipient | contribution | |
| | or substantial contributor | | | |
| a Paid during the year | | | | |
| See attachment #12 | | | | |
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| Total | | | | 3b |
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| Enter gross amounts unless otherwise indicated. | Unrelated | business income | Excluded by | section 512, 513, or 514 | (e) |
|---|-------------------------|---------------------------------------|--|--------------------------|---|
| 1 Program service revenue | (a) Business code | (b) Amount | (c) Excl. code | (d) Amount | Related or exempt function income (See the instructions.) |
| ĭ ŀ | | | Code | | 11134 40 60 113.) |
| a b | | | | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| 1 | | | | | |
| g Fees & contracts from government agencies 2 Membership dues and assessments | | | - | | |
| 3 Interest on savings and temporary cash investments | | | 14 | 992 | |
| 4 Dividends and interest from securities | | ···· | 14 | 8,941 | |
| 5 Net rental income or (loss) from real estate: | | | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal property | | | | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other than inventory | | | | | |
| 9 Net income or (loss) from special events, | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | | | | |
| 11 Other revenue a | | | | | |
| b | | | | | |
| c | | | | | |
| d | | · · · · · · · · · · · · · · · · · · · | | | |
| e | | | | | |
| 12 Subtotal. Add columns (b), (d), and (e) | | | | 9,933 | 0 |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 9,933 |
| See worksheet in line 13 instructions to verify calcula | | | | | |
| Part XVI-B Relationship of Activities t | o the Acco | mplishment of E | xempt Pu | rposes | |

accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See the instructions)

TWF 990

| \$ 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 (1) Cash | Part X\ | /II Information F Exempt Orga | | ansfers To and | Transact | ions an | d Relation | nships Wit | h Noncharit | able | |
|--|----------------------|---|-----------------------|--|----------------|--------------------------|-------------------|----------------------------------|---------------------------------------|----------|---------|
| Transfers from the reporting foundation to a nonchamitable exempt organization of (1) Cash | 1 Did | the organization directly | or indirectly enga | age in any of the foll | owing with a | ny other o | rganization d | lescribed in se | ection | Yes | No |
| a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash (2) Other assets 5 Other transactions: (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets to a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets. (4) Reimbursement arrangements (4) Reimbursement arrangements (5) Cash or loan guarantees (6) Performance of services or membership or fundrasing solicitations (7) The services of tachies, equipment, mailing lists, other assets, or paid employees (8) Performance of services or membership or fundrasing solicitations (9) Ferromance of services or membership or fundrasing solicitations (10) Cash or loan guarantees (10) Cash or loan | | | | | | | | | | | |
| (2) Other rassels b Other transactions: (1) Sales of assets from a noncharitable exempt organization | | | | | | | | | | | |
| 2 a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in socious or sharing arrangements. (a) Amount involved (b) Amount involved (c) Name of inoncharitable exempt organization 15(2) X 15(3) Exhalic of facilities, equipment, or other assets. (d) Remitturisment arrangements 15(4) X (d) Remitturisment arrangements 15(5) Loans or loan guarantees (e) Performance of services or membership or fundrasing solicitations 15(6) X (f) Performance of services or membership or fundrasing solicitations 15(6) X (g) Remitturisment of facilities, equipment, making lists, other assets, or paid employees (g) Performance of services grown by the reporting foundation, if the foundation received less than far market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements 17(2) X 18(4) X 18(4) X 18(5) Line no 18(6) Performance of services are complete the following schedule. 2 a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in socious and sharing arrangements. 2 a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in socious and sharing arrangements. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements. (a) I I "Yes," complete the following schedule. (b) Type of organization (c) Description of relationship (d) Description of relationship (e) Description of relationship (e) Description of relationship (e) Description of the best of in-horse organization or proper organization or proper organization or proper organization or proper organization or proper organization organization or p | | · - | | | | | | | 1a(1) | | X |
| (a) Purchases of assets from a noncharitable evempt organization 1b(1) X 1b(2) X 1b(3) X 1b(3) X 1b(4) X 1b(5) X | | | | | | | | | 4 (5) | | Х |
| (a) Purchases of assets from a noncharitable evempt organization 1b(1) X 1b(2) X 1b(3) X 1b(3) X 1b(4) X 1b(5) X | • • • | | | | | | | | | | |
| (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets. (4) Reminumbrasement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (7) Sharing of facilities, equipment, making lists, other assets, or paid employees (8) It the answer to any of the above is "Yes," complete the following schedule. Column (9) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the followation received less than fair market value in any transaction or sharing arrangement, show in column (4) the value of the goods, other assets, or services received. (a) Lineago (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (a) Lineago (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of relationship (b) If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship (c) Description of relationship (d) Description of relationship (e) Description of relationship (e) Description of relationship (e) Description of relationship (f) Description of relationship (g) Particular Supply or speaker (their than tappyer) is based on all information of which prepare has any knowledge (g) Particular Supplement (g) Particular | | | ncharitable exemi | ot organization | | | | | 1b(1) | | X |
| (a) Rental of facilities, equipment, or other assets. (b) Rental of facilities, equipment arrangements. (c) Loans or loan guarantees. (d) Performance of services or membership or fundraising solicitations. (e) Performance of services or membership or fundraising solicitations. (f) Rental solicities, equipment, making lists, other assets, or paid employees. (g) It 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 liess than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Lineano (b) Amount involved (c) Name of noncharitable oxempt organization (d) Description of transfers, transactions, and sharing arrangements. (a) Lineano (b) Amount involved (c) Name of noncharitable oxempt organization (d) Description of relationship arrangements. (a) Name of organization (b) Type of organization (c) Description of relationship belief, it is true, correct, and colored the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship belief, it is true, correct, and colored the state of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief in the strue, correct, and colored the state of the property of the structure of the state of the property of the property of the state of the property of the structure of the property of the property of the structure of the property of th | ٠, | | • | • | | | | | | | Х |
| (4) Reimbursement arrangements 114(4) X (5) Loans or loan guarantees 115(6) X (6) Performance of services or membership or fundraising solicitations 115(6) X (7) (8) (8) Performance of services or membership or fundraising solicitations 115(6) X (1) (1) (1) (1) (1) (2) (3) (1 | | | | | | | | | | | X |
| (5) Loans of loan guarantees | | | | | | | | | | 1 | X |
| (6) Performance of services or membership or fundraising solicitations. c Sharing of facilities, equipment, mailing lists, other assets, or paid employees. d 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. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship (a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of pergury, 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, errect, and complete. Declaration of preparer has any knowledge surpliced in the complete of the following schedules and statements and to the best of my knowledge and belief, it is true, errect, and complete. Declaration of preparer face any knowledge surpliced in the complete of the following schedules and statements and to the best of my knowledge and belief, it is true, errect, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge surpliced. Title Promotor of the Code (Different Code) Promotor of the code (Different Code) Promotor of the code (Different Code) Promotor of the code (Different Code) Promotor of the code (Different Code) Promotor of the code (Different Code) Promotor of the code (Different Code) Promotor of the code (Different Code) Promotor of the code (Different Code) Promotor of the code (Different Code) Promotor of the code (Different Code) Promotor of the code (| | | | | | | | | | <u> </u> | X |
| c Sharing of facilities, equipment, mailing lists, other assets, or paid employees. d 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. (a) Line no (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements 2 a 1s 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 501(c) of the Code (other than 501(c) of the Code (other than 501(c) of the Code (other than 501(c) of the Code (other than 501(c) of | | - | | | | | | | | | Х |
| d 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. (a) Line no (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements 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 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 bester, it is true, correct, and complete. Declaration of prepare (other than tappyer) is based on all information of which prepare has any knowledge Code | | | • | _ | | | | | | | X |
| 2 a 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? | d If the good | e answer to any of the a ds, other assets, or servi | bove is "Yes," co | emplete the following reporting foundation | schedule. C | Column (b) dation rec | should alwa | ays show the f an fair market | air market valu value in any tra | e of the | ∍ on |
| 2 a 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? | | | | | | 4.0 - | | | | | |
| section 501(c) of the Code (other than section 501(c)(3)) or in section 527? | (a) Line no | (b) Amount involved | (c) Name of no | ncharitable exempt | organization | (a) Descri | iption of transfe | ers, transactions, | and sharing arran | gement | |
| section 501(c) of the Code (other than section 501(c)(3)) or in section 527? | | | | | | | | | | | |
| (a) Name of organization (b) Type of organization (c) Description of relationship 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) is based on all information of which preparer has any knowledge Here Print/Type preparer's name Preparer's signature Date Check X if PTIN Self-employed P01223245 | 2 a ls th | ne foundation directly or | indirectly affiliate | d with, or related to, | one or more | tax-exem | npt organizati | ons described | | | _ |
| (a) Name of organization (b) Type of organization (c) Description of relationship 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) is based on all information of which preparer has any knowledge Out Signature of officer or trustee Date Date Check If PTIN | | , , | | on 501(c)(3)) or in se | ction 527? . | | | | □ Υ | es 🛚 | No |
| 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) is based on all information of which preparer has any knowledge May the IRS discuss this return with the preparer shown below (see instructions)? Yes X Nowledge Print/Type preparer's name Preparer's signature Date Check X if PTIN self-employed P01223245 | | (a) Name of organiza | tion | (b) Type of | f organizatioi | n | | (c) Descriptio | n of relationship | p | |
| Sign Here Sign | | | | | | | | | | | |
| Here Sign Formation Form | | Under penalties of perjury, | I declare that I have | examined this return, in | cluding accomp | canying sche | dules and state | ements, and to the | e best of my know | wledge a | nd |
| Propagate Continue | Sign | Jones, it is true, correct, and | Complete, Decidia | | wapayor/13 | | | | | | ture |
| Signature of officer or trustee Date Title (see instructions)2 Yes X N Paid Print/Type preparer's name Preparer's signature Date Check X if PTIN self-employed P01223245 | Here | 1 (Jeves) | E. Ell | 15/1 | 4/12 | Ire | asusos | | | | |
| Propager self-employed P01223245 | ł | Signature of officer | / | | - | Title | | | | _ | |
| Propager self-employed P01223245 | | Print/Type prepare | r's name | Preparer's signat | ture | 1 | Date | Check | X if PTIN | | |
| Droparor | | | | ' | | | | I | \cup , | 2232 | 245 |
| | Prepare | Firm's name ► KE | ENNETH CU | TLER CPA | | | | Fırm's EIN ▶ | · · · · · · · · · · · · · · · · · · · | | |

Phone no. (801) 936-6200

Use Only

JVA

Firm's address ▶ 35 N REDWOOD ROAD

990 SCHEDULE OF ACCOUNTING FEES

Attachment 1: page 1 - 990-PF Page 1, Part I, Line 16b Open to Public For calendar year 2011, or tax period beginning , and ending Inspection **Employer Identification Number** Name of Organization 87-0609445 DIANA S ELLIS FOUNDATION Adjusted Disbursements for Net Investment Amount **Accounting Category** Net Income Income Charity TAX PREPERATION 750 Total: 750

990 SCHEDULE OF OTHER PROFESSIONAL FEES

| <u> Attachment 2: page 1 - 990-</u> | PF Page 1, Page | art I, Line | 16C | |
|--|-----------------|--------------------------|------------------------|------------------------------|
| Open to Public Inspection For calendar year 2011, or tax pe | eriod beginning | , and e | endina | |
| Inspection For calendar year 2011, or tax polyname of Organization | Shou beginning | , 2/10 | | ntification Number |
| DIANA S ELLIS FOUNDATION | | | 87-0609 | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charity |
| MANAGEMENT FEES | 2,883 | | | |
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| Totali | 2 002 | | | |

990 SCHEDULE OF TAXES PAID

Attachment 3: page 1 - 990- PF Page 1, Part I, Line 18 Open to Public , and ending For calendar year 2011, or tax period beginning Inspection Employer Identification Number Name of Organization 87-0609445 DIANA S ELLIS FOUNDATION Adjusted Disbursements for Net Investment Amount Category Income Net Income Charity FOREIGN TAXES 30 FEDERAL TAXES 78 Total: 108

990 OTHER EXPENSES SCHEDULE

Attachment 4: page 1 990-PF Page 1, Part I, Line 23

Open to Public Inspection

For calendar year 2011, or tax period beginning

, and ending

Name of Organization

Employer Identification Number

| | Dougasia and | Not Investment | 87 - 0609445 Adjusted Disbursemer | | |
|-------------------------|---------------------------------------|----------------|-----------------------------------|------------------|--|
| Description of Activity | Revenue and | Net Investment | | Disbursements fo | |
| | Expenses | Income | Net Income | Charity | |
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990 SCHEDULE OF INVESTMENTS - CORPORATE STOCKS

Attachment 5: page 1 - 990-PF Page 2, Part II, Line 10b Open to Public Inspection For calendar year 2011, or tax penod beginning , and ending Name of Organization Employer Identification Number DIANA S ELLIS FOUNDATION 87-0609445 FMV at Description of Property Cost Book Value Fair Market Value Year End MUTUAL FUNDS Х 268,037 248,820 Total: 268,037 248,820

990 SCHEDULE OF INVESTMENTS - CORPORATE BONDS

Attachment 6: page 1 - 990-PF Page 2, Part II, Line 10c Open to Public , and ending Inspection For calendar year 2011, or tax period beginning Employer Identification Number Name of Organization 87-0609445 DIANA S ELLIS FOUNDATION FMV at Fair Market Value **Description of Property** Cost Book Value Year End GENWORTH FINANCIAL 10,019 10,056 Total: 10,019 10,056

990 PART IV CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

| | | e 1 - 990-PF Page | 3, Part IV | , line 1 | | |
|----------------------------|-----------------------------|---|----------------------|--------------------------|-------------------|-------------------|
| • | n to Public | | | and and ne | | |
| | of Organization | year 2011 or tax period beginning | | , and ending | Employer identifi | cation Number |
| | NA S ELLIS FOU | NDATION | | | 87-060944 | |
| | | e the Kind(s) of Property Sold (e.g., I | Real Estate | (b) How Acquired | (c) Date Acquired | (d) Date Sold |
| | | rehouse, or Common Stock, 200 sh | | P Purchase D Donation | (mo , day, yr) | (mo , day, yr.) |
| 1 | PIMCO | Citodos, or Comment Stock, 250 one | 0. 11.20 00 / | P | | 06-22-2011 |
| 2 | COLUMBIA MAR F | OC EO | | | | 06-22-2011 |
| | COLUMBIA MAR F | | | | | 06-22-2011 |
| 4 | COLUMBIA MARSI | | | | | 06-22-2011 |
| 5 | COLUMBIA MAR F | | | | | 06-22-2011 |
| 6 | CITICORP | - × | | | | 10-17-2011 |
| | 011100111 | | | | | |
| | | | | | | |
| | (e) Gross Sales Price | (f) Depreciation Allowed | (g) Cost or Oth | ner Rasis | (h) Gain o | r (loss) |
| 1 | (e) Gloss Sales File | (i) Depreciation Allowed (or allowable) | Plus Expens | 1 | • • |) Minus (g) |
| 1 | 5,017 | (or allowable) | 1 Ido Expons | 4,500 | (0) 7 100 (1 | 517 |
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| 3 | 3,576 | | | 2,546 | | 1,030 |
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| 23456 | 10,000 | | | 10,000 | | _ |
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| | Complete only for assets sh | nowing gain in column (h) and owne | ed by the foundation | on 12/31/69 | (I) Gains (Col (| h) Gain Minus |
| | (I) F M.V. as of 12/31/69 | (j) Adjusted Basis | (k) Excess if | | ,, , | Less Than -0-) or |
| | | as of 12/31/69 | Over Col. | ** | | om col. (h)) |
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990 BOOKS ARE IN CARE OF

| Attach | ment 8 - 990-PF Page 5, Part VII-A, Line 14 | |
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| Inspection | For calendar year 2011, or tax period beginning , and | |
| Name of Org | | Employer Identification Number |
| DIANA S | E ELLIS FOUNDATION | 87-0609445 |
| Part VII-A - | Line 14 | |
| Individual Na or Business Na | me | ELLIS |
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| US Address | : | |
| Zıp o or Foreign Addi | ode 84103 City Salt Lake City ess | State <u>UT</u> |
| City | | |
| Prov | nce or State | |
| Cou | ntry | <u></u> |
| Post | al code | |
| Pho | ne Number | (801)595-8089 |
| Fax | Number | |

990 CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

Attachment 9: page 1 - 990-PF Page 6, Part VIII

Open to Public
Inspection For calendar year 2011, or tax period beginning , and ending

Name of Organization

Employer Identification Number

| Name of Organization Employer Identification Number | | | | | | |
|--|-----------------------|----------------------|-----------|---------------|--------------------|--|
| DIANA S ELLIS FOUNDATION (A) Name and Address (B) Title and Average (C) Compensation (If (D) Cont to Employee (E) Expense According to Employee (E) Expense According to Employee (E) Expense According to Employee (E) Expense According to Employee (E) Expense According to Employee (E) Expense According to Employee (E) Expense According to Employee (E) Expense According to Employee (E) Expense According to Employee (E) Expense According to Employee (E) Expense According to Employee (E) Expense According to Employee (E) Expense According to Employee (E) Expense According to Employee (E) Expense According to Employee (E) Expense According to Employee (E) Expense According to Employee (E) Expense Employee (E) Employee (E) Expense Employee (E) Employee (E) Expense Employee (E) Employee (E) Expense Employee (E) Em | | | | | | |
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| | Hrs per Week | not paid, enter 0) | Ben. Plar | ns & Def Comp | & Other Allowances | |
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| Phoenix, AZ 85016 | İ | 0 | | 0 | 0 | |
| ANNE M ELLIS | SECRETARY | | | , | | |
| 98 SEWARD ST | 0.00 | | ľ | | | |
| San Francisco, CA 94114 | | 0 | 1 | 0 | 0 | |
| GEOFFREY E ELLIS | TREASURER | | ļ | | | |
| 763 FIRST AVE | 0.00 | | | | | |
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990 COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES

Attachment 10: page 1 990-PF Page 6, Part VIII, Line 1 Open to Public For calendar year 2011, or tax period beginning , and ending Inspection Name of Organization **Employer Identification Number** DIANA S ELLIS FOUNDATION 87-0609445 Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (d) Contributions to Empl Benefit Plans & Deferred Compensation (e) Expense Account and Other Allowances (a) Name and Address of Each Employee Paid More (b) Title and Average Hours (c) Compensation Per Week Devoted to Position Than \$50,000 none 0 0 0

990 COMPENSATION OF THE FIVE HIGHEST PAID INDEPENDENT CONTRACTORS FOR PROFESSIONAL SERVICES

| <u>Attachmen</u> | t 11: page 1 990-PF Page 6, Part V | III, Line | 2 | |
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| Inspection | For calendar year 2011, or tax period beginning | , and end | | |
| Name of Organiza | | | Employer Identific | |
| | LLIS FOUNDATION | | 87-0609445 | · · · · · · · · · · · · · · · · · · · |
| Part VIII Con | pensation of the Five Highest Paid Independent Contractors for | | | , |
| (a) Name and | address of each independent contractor paid more than \$50,000 | (b) Type | of service | (c) Compensation |
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990 GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

Attachment 12: page 1 990-PF Page 11, Part XV Line 3a

Open to Pu

Inspection For calendar year 2011, or tax period beginning

, and ending

Name of Organization

DIANA S ELLIS FOUNDATION

Employer Identification Number

87-0609445

| Name and Address (home or business) CANINE COMPANIONS FOR INDEPENDENCE OGDEN SCHOOL FDN OGDEN UTAH WEBER PATHWAYS OGDEN Show any Relationship to Any Foundation Manager or Substantial Contributor Status of Recipient Status of Recipient Status of Recipient OGIFT Status of Recipient Status of Recipient GIFT 5,000 GIFT 5,000 | DIANA S ELLIS FOUNDATION | | | | 9445 | | |
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| INDEPENDENCE OGDEN SCHOOL FDN OGDEN UTAH WEBER PATHWAYS OGDEN UTAH S,000 SIFT 5,000 5,000 | Name and Address (home or business) | | Recipient | | | | |
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